

Introduction

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uniform in their Operation. upon y^e
whole then I embrace the Dogmatic
plan of teaching Physic, & shall deliver
these Lectures in this way only. but
I shall always combine Experience &
Reasoning together.

But some will tell you y^e all Phy-
sicians practice a like however diffi-
cult their Theories may be, & hence the
little Importance of Theory or Reasoning
in Physic! but I deny this Fact, for
altho in Consultations men may agree
yet a man who thinks for himself will
in his private practice judge for himself
also. the Practice of different Ages is
widely different, & has always

1a, These pictures relate only to the
Author's *Precis de la médecine*

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influenced by Theory as I would point out to you at large was this a proper place for it. few men have Genius ^{enough} to study System or Theory. even men of Genius have fallen into Errors of this kind: Lieutaud is an Author of this kind: he never distinguished Genera or Species of Diseases, nor are the Symptoms of Diseases related in the Order in which they occur in ~~them~~ his *Historia Morbi*. his Methods of Cure are not ~~less~~ unexceptionable. he confines himself to a certain List of Medicines which he prescribes in all Diseases alike. ^{These} ~~These~~ ^{frictions} ~~frictions~~ upon an Author ^{is} ~~is~~ ⁱⁿ ~~in~~ ^{you} ~~you~~ have all in your hands absolutely ~~un~~

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nor do I think them foreign to a course
of Lectures on the Practice of Physic.
- He tells us too that all his Recipes
are the Result of Experience. Strange!
that Experience sh^d. teach differently
in France from w^h. it does in England!

In my Opinion a new Method
of studying Physic must be proposed.
- Facts must be better arranged,
- Diseases must be better distinguished,
& proximate Causes must always be
investigated if we would wish to advance
our Knowledge in Physic, & our Skill
in curing Diseases. Still I would advise
you not to be too much attached to

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any One System, Altho some One System
is Absolutely necessary. I believe we
never had a worse set of Practitioners
than at present, ^{ch} w: is owing to their
not being attached to any One System, for
we are fluctuating between ² Systems
of D^r Boerhaave Stahl & Hoffman.

But you are happy Gentlemen
in having attended Dr. Gregory's
Lectures upon this subject ^{ch} w: I may say
are the best now given in Europe. I
do not pretend to improve upon them.
— all I design is, to deliver a few general Doc-
trines ^{ch} w: are peculiar to myself, & such as are
^{not} to be found in ^{any} Books of Physic. They are Doc-
trines ^{ch} w: I have embraced, & taught these 20 Years,
& which many of you have heard & read from Other
Mouths & Other Books besides my own.

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I shall now add, what Assistance you may receive from Books. I think it absolutely necessary that you should be acquainted wth the works of Boerhaave Stahl & Hoffman. next to them I would advise you always to have Lauvayer's Nosologia Methodica ^{before} your ^{Eyes} ~~hands~~, as also Linnaeus & Boer who have each of them attempted a systematic Arrangement of Diseases.

To assist you in the Investigation of proximate Cause you must consult Dissections. the best ^{Books} for this purpose are Morganstus' Edition of Bonetus' Lequel de Methodo Anatomica - Morganstus de Causis & sedibus morborum. & a late work of Linnaeus called "

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Before I deliver my plan I shall give you a few more general principles. I before pointed out to you the Importance & necessity of System in Physic.

Diseases may be distinguished 1st as Objects of Sense & in this manner may be reduced to a *Methodica* & 2nd from their proximate Causes. This last Method of dividing Diseases has hitherto been unattempted. I shall ^{not} now offer my Reasons for adopting it, but hope to convince you of its propriety hereafter. We have great encouragement to proceed in Arranging Diseases in a systematic way from y^e success wh^{ch} the botanics of Botany have met with in the Arrangement of plants. Dr. Gaubius has pointed out to us the possibility of the

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same success in Medicine in ~~1805~~ ¹⁸⁴⁰ ~~5~~ ²
of his Pathology. Altho' we have as yet
reaped no great Advantages from the Attempts
y^t have been made, yet it should not dis-
courage us from making further & more
vigorous Attempts in this way. particu-
larly cannot be studied by themselves from
w^h we said before concerning the Nature
of Definition in the Language of the
Logicians. When we knew but a few
Genera & species of Plants our Investigation
of them was much more difficult than
at present since our Knowledge of Plants
has become more enlarged. But even y^e
Science of Botany cannot be complete till
every plant in the world is found out. all

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It is true, to show the necessity of reducing Particulars to System in Order to establish our Knowledge of them. This then is my Apology for the Critiques I intend to make on the Arrangement of Diseases by Others, & the one I propose to offer of my Own.

In all Systems of Science the utmost Respect must be paid to ^{the} Nomenclature of particular Genera & Species or all our Language will be very vague & inaccurate. Denomination will always keep pace precisely wth distinction in all Sciences more especially in Medicine.

I shall now give you a few Critiques upon the Systems of Physic that have

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been attempted each of which are far from being accurate. I shall therefore reject them all, but first give you my Reasons for it.

You see from the Comparison of three of them in the 1st page that Sauvage Linnaeus & Vogell all agree in the 1st, 4th, 6, 7, & 9th in the 8th & 10 Sauvage & Linnaeus agree, as also in their 2nd & 3rd, except that Linnaeus has divided one of these last Classes into 2 Orders. Sauvage & Vogel agree in general except in the 5th Class of 4^e forms & a few others particular where Orders are made Classes or Classes Orders. The general Agreement of these 3 Authors points out the propriety & Advantages of Systematic Arrangement in Diseases.

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Some of these Classes ought entirely to be rejected from our System. the vitæ is established by too ~~a~~ slender a Definition, as being derived from the seat, which we know is liable to great Ambiguity. - This Class in particular is confounded th w: all the Diseases of the skin w: properly come under another Class.

The Anhelationes should likewise be rejected as being ~~an~~ improper Class. it unites many Genera of Diseases which have no Relation to One Another except in the single Symptom of difficult Respiration. $\frac{e}{y}$ Asthma & Hydrothorax have no Relation to One another ~~but~~ ^{but} they are both arranged in this Class.

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The Dolores should likewise have no Locum
:dation in a System of Physic. it is formed from
a single Symptom ⁱⁿ was the Case ⁱⁿ the
former Class. in ^{all} our Arrangement of
Diseases we should strictly avoid blending
Diseases together from Symptomⁱⁿ: are
common to many or most of them. Thus
the Cardialgia & Rheumatism are placed in
this Class. & yet how widely different are
the Causes & Cures of these two Diseases!
Besides he omits many Diseases ~~in~~
under this Head where pain is ^{the} most
characteristic Symptom, nor does he properly
distinguish between Uneasiness & pain, &
hence he reduces sickness. It is for us to
this Class. The Other 7 Classes of Locum.
vaue may be admitted under proper

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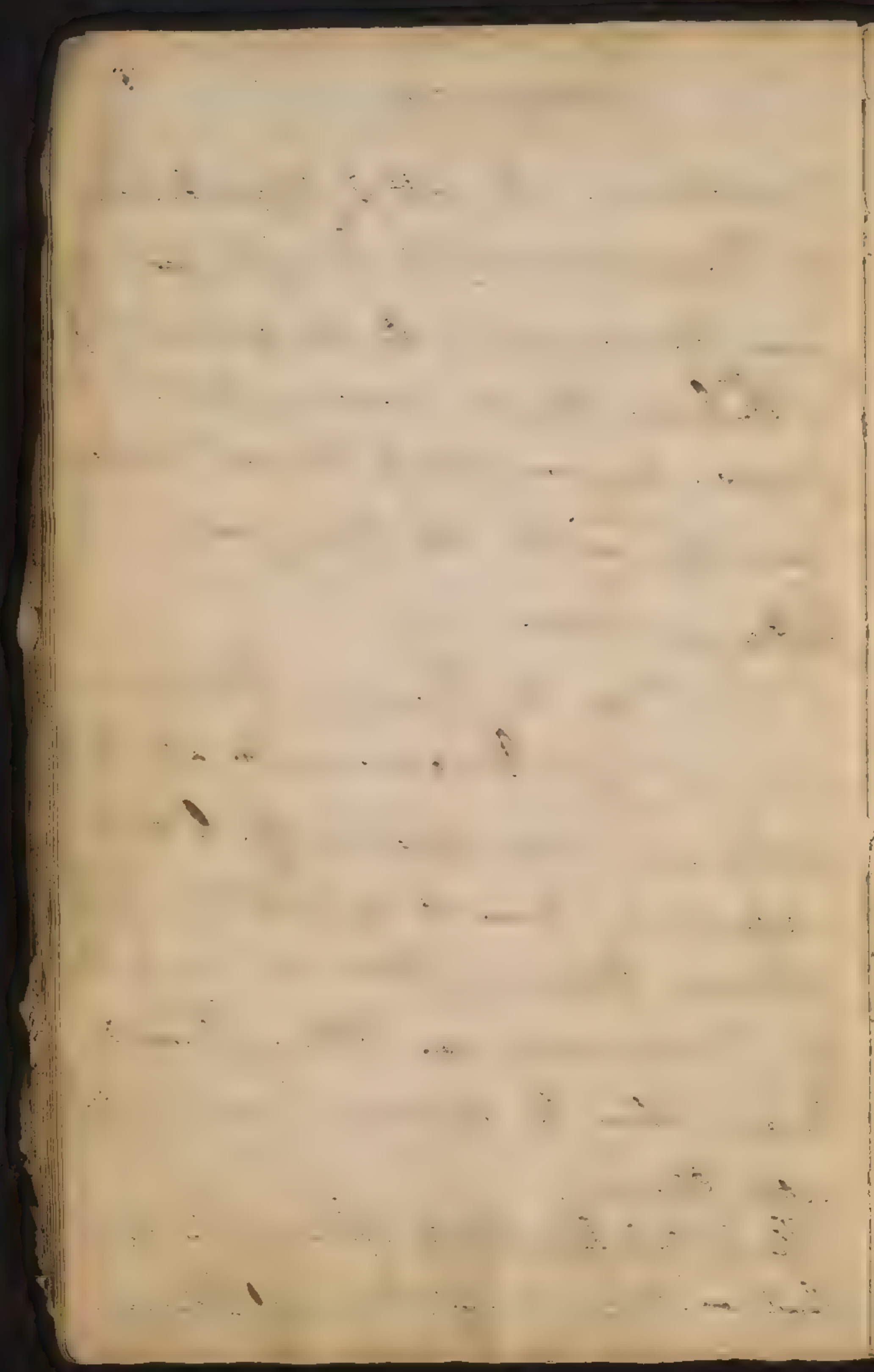
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Restrictions. The 2 & 3 viz: the Fevers
& Phlegmatics might w: ^{the} equal propriety
have been reduced to the one general Class
of Fevers. They are however natural
Classes. They are all defective in this par-
: ticular viz: ^{in having} rejected all Cases of external
Inflammation.

The 5th viz: the Spasmi is likewise a
natural Class, & common to all the
Authors we have spoken of. But it
is defective in them all, in excluding the
Asthma - Palpitatio Cordis &c, nor should
they be separated from other Spasmodic
Diseases where the Spasm is more diffi-
culty Observed.

The 6th Class Debilitates is founded in Nature
but as it comprehends Organical Diseases



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of the Senses, which properly belong to another Class. This Class ought only to comprehend the more general Affections of the Nervous System.

The 8th Mania is upon the whole a natural Class, but it is ~~not~~ faulty in comprehending the organical Affections of particular Organs such as the Cataract & several other Diseases of the Eye ^{as} we have no Relation to Hypochondriasis or Delirium.

The 9th Fluxus is a faulty Class in not distinguishing those Fluxus^{es} which are active & passive as Pathologists call them, as well as those ^{which} are & those ^{which} are not attended with Fever.

The 10th Lachesis is likewise incorrect in

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not distinguishing Organic from Systematic Affections. nor is the Definition of this C properly restricted.

To these Leases of Lamange Bozel has added another viz the Epischeses ^{ch} w. Lamange rejects upon the Au^r: of its be defined by negative qualities. This I grant should be avoided in all Definitions ^{as} sometimes much as possible, but they must be colled in. Lamange himself falls in to it in a hundred Instances in the Course of his work.

I cannot say however there was any necessity for a Lease of this kind, as the suppression of Excretions is often nothing else but a Symptom of Other Disease.

After having raised the Objections

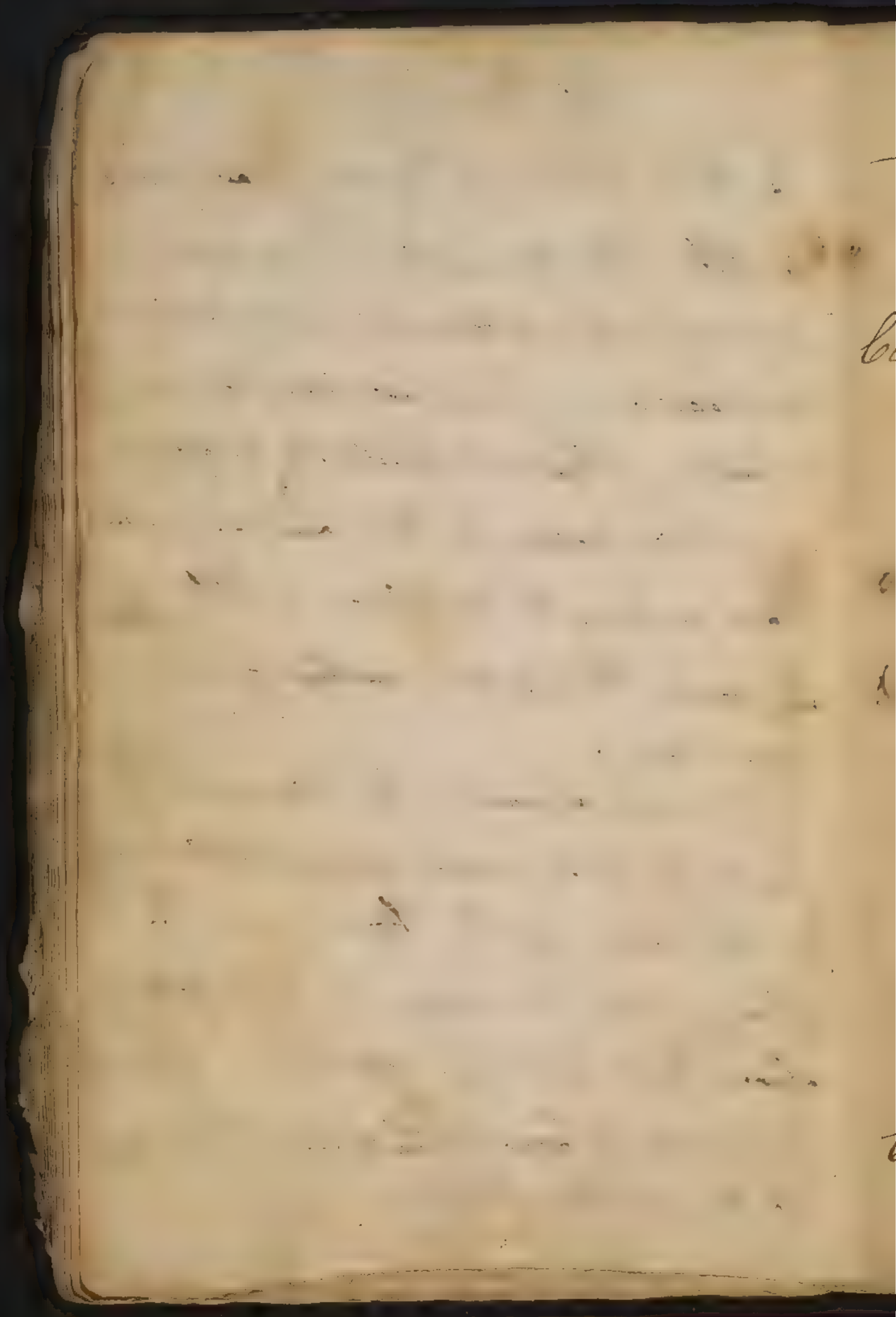
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to those Systems of Physic I have presumed
to Offer One of my Own ^{is} is indeed a
very imperfect Attempt at a horologia
methodica. I had not time to make
it better. I tho't it absolutely necessary
as a Foundation for these Lectures, and
I am willing to sacrifice a little of
my own Reputation ~~rather~~ for your
Advantage.

I have divided the plan into two
parts. the first come immediately un-
der the notice of the Physician. the 2.nd
belongs more properly to the Surgeon &
upon that Art: has often been left out
of a course of practical Lectures, ⁱⁿ w: I propose
to do in this the present.



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Synopsis morborum

Part I.

Morbi universales sive totius Systematis

Classis I. Pyrexiae. Post Horrorem, pulsus
frequens, calor major, viribus artuum
imminutis.

Ordo 1^{mus} Febris. Pyrexia sine morbo locali
primario.

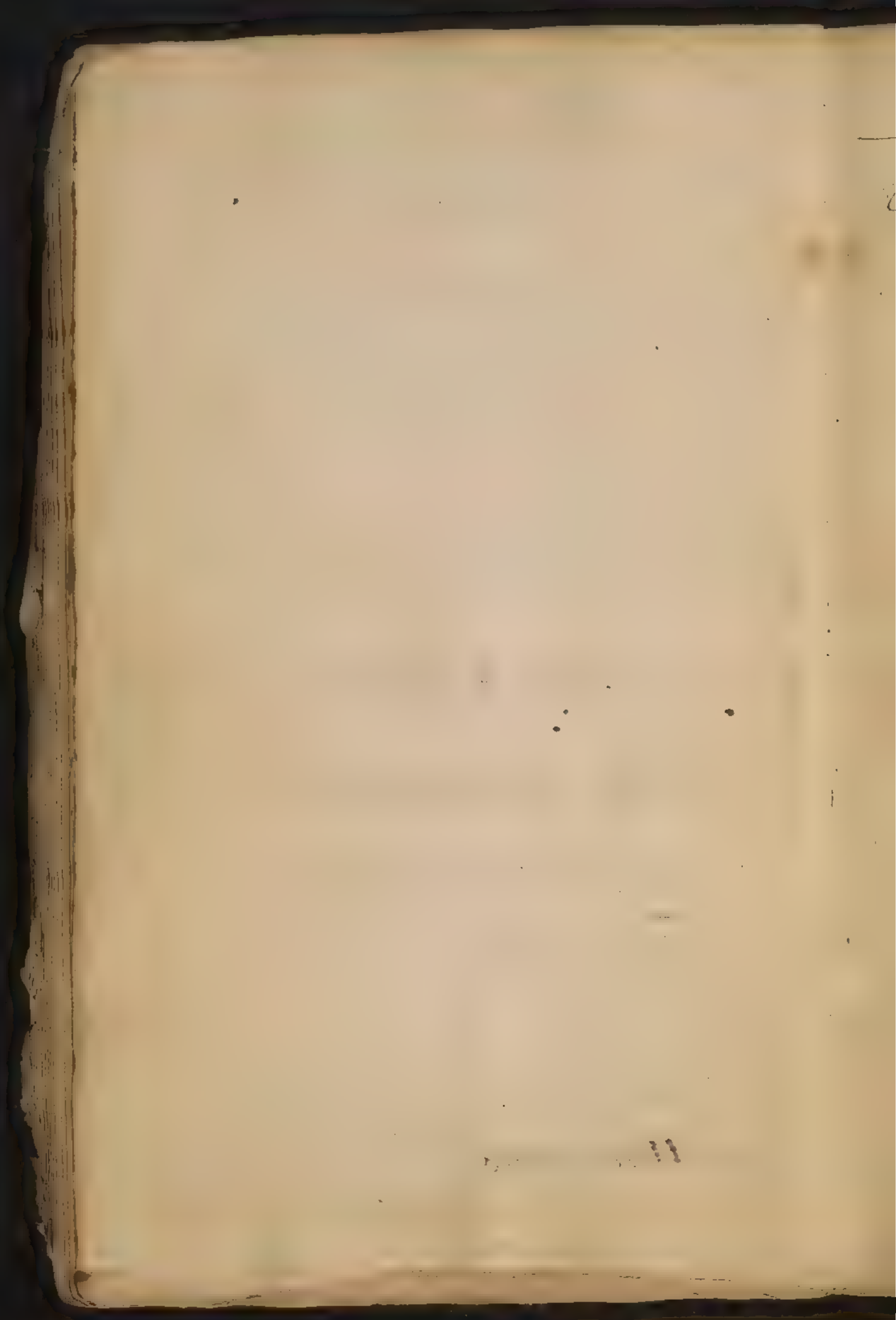
Ordo 2^{ndus} Phlegmasia. Pyrexia cum dolore
topico.

Ordo 3^{tius} Eanthemata. Post Pyrexiam phleg-
masiae plures in cute sparsae.

Ordo 4^{thus} Hæmorrhagia. Pyrexia cum profu-
sione sanguinis.

Ordo 5^{us} Profluvia. Pyrexia cum acuta
excretionem non sanguinolenta.

Class: II Neuroses. Sensus & motus affecti-
ones sine pyrexia vel vitio organico.



Synopsis Morborum ¹⁹

Classis II Neuroses.

Ordo 1^{mus}: Comata. Sensus & motus imminuti
cum sapore.

Ordo 2^{us}: Adynamica. Sensus & motus immi-
nuti sine sapore.

Ordo 3^{ius}: Spasmi. Muscularium fibrarum
contractiones inordinatae.

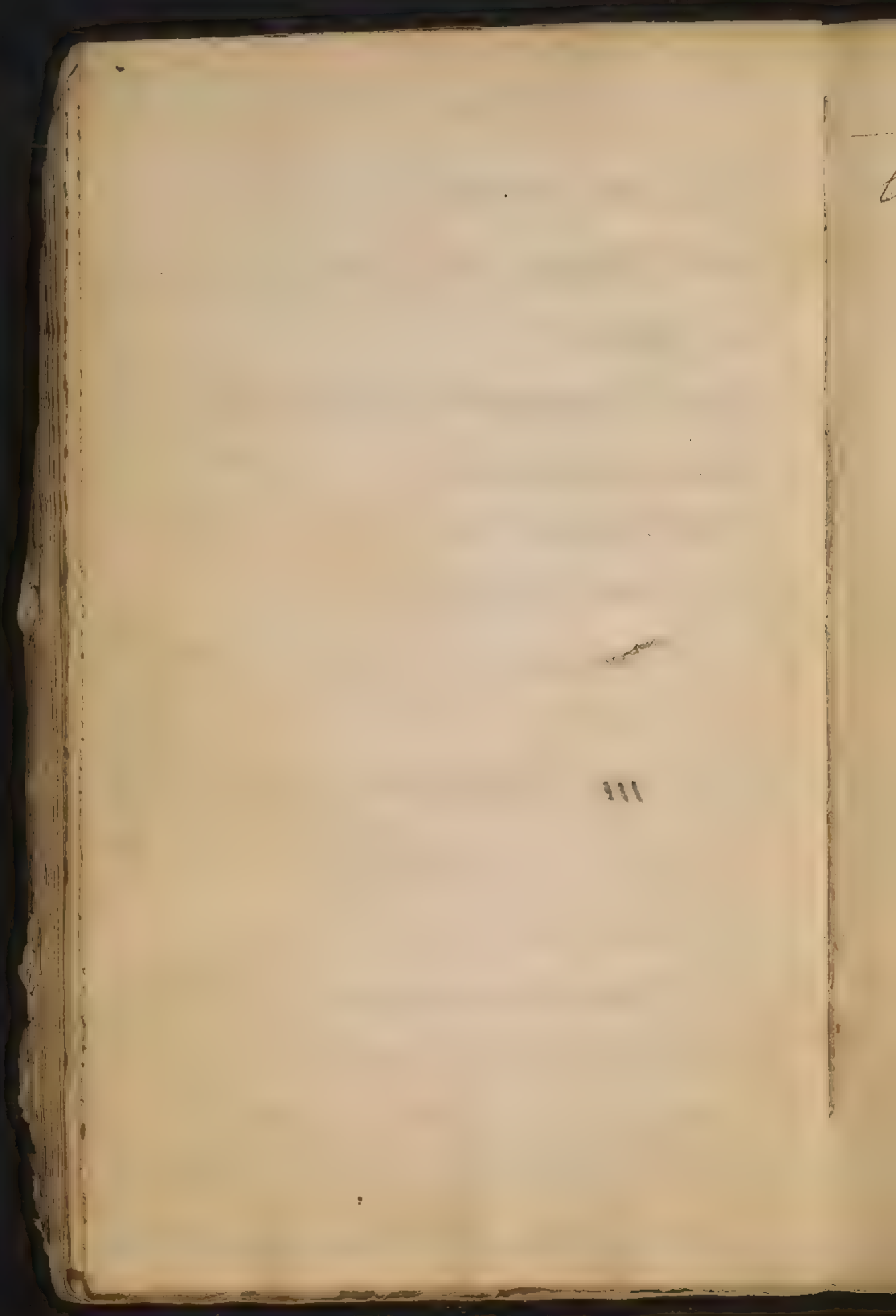
Ordo 4^{tus}: Insania. Sensus externi & interni
inordinati.

Classis III Cachexiae. Habitus totius ^{externi}
Corporis, vel magna ejus partis
depravatus.

Ordo 1^{mus}: Macies. Corporis & tenuatis.

Ordo 2^{us}: Intumescencia. Corporis totius vel
magna ejus partis volumen adauctum.

Ordo 3^{ius}: Impetigines. Cutis defoedata
pustulis parvis, crustaceis plerumque
gregalibus.



Synopsis Morborum 20

Classis III Cachexia.

Ordo 4^{to}: Decolorationes. Cutis color in
toto corpore mutatus.

Pars II.

Morbi particulares sive partis unius

Organici.

Classis IV. Epischeses. Hernendarum
suppressiones

Classis V. Dysaesthesiae. Sensus imminuti.

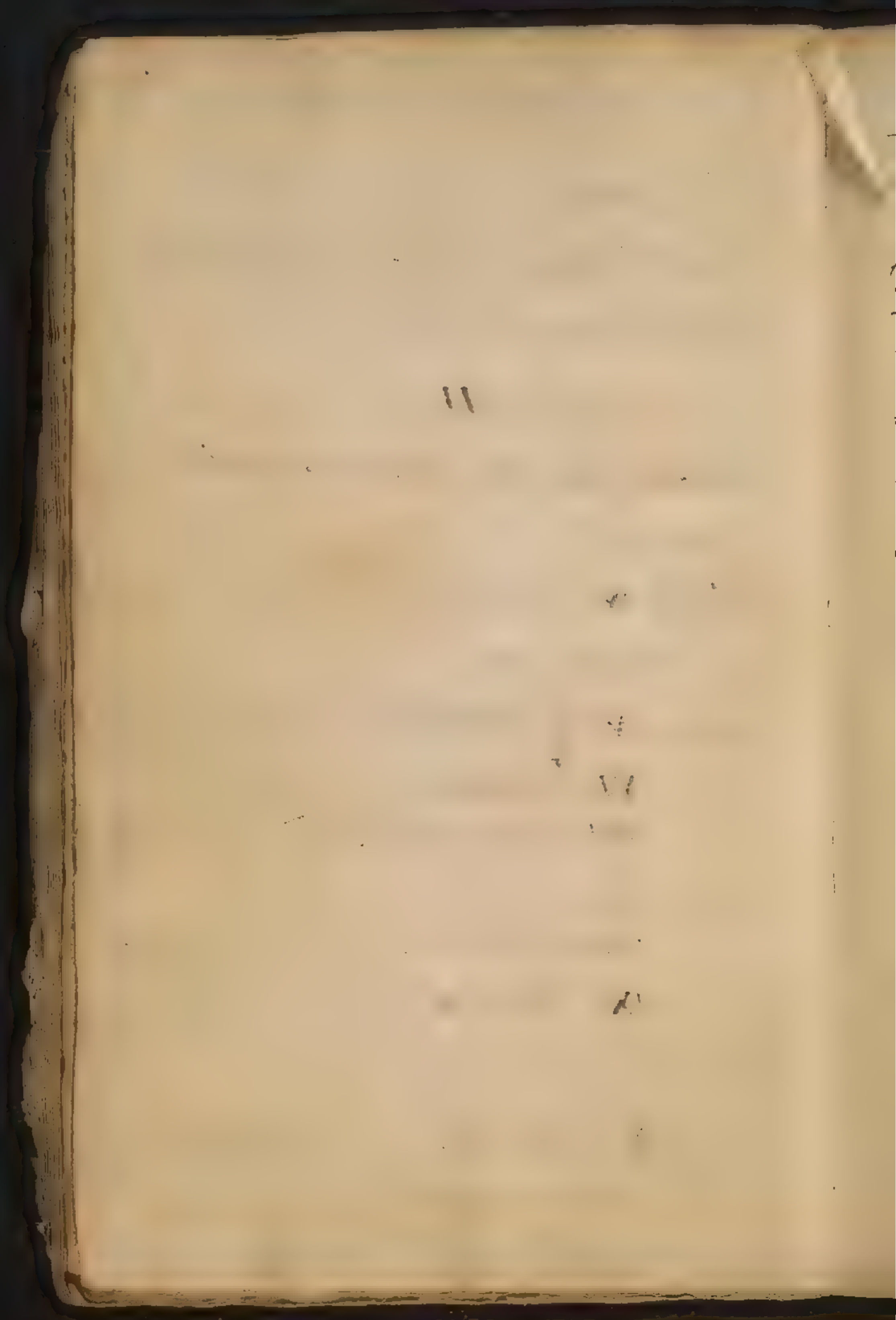
— VI Dialysis - Solutiones continuæ.

— VII Pæcrescentia. Tumores a soli:
= dis adauctis.

— VIII. Cystides. Tumores capsulati.

— IX. Ectopia. Partium solidarum
e suis locis deviationes.

— X. Maculae. Cutis coloris in
partibus mutatio.



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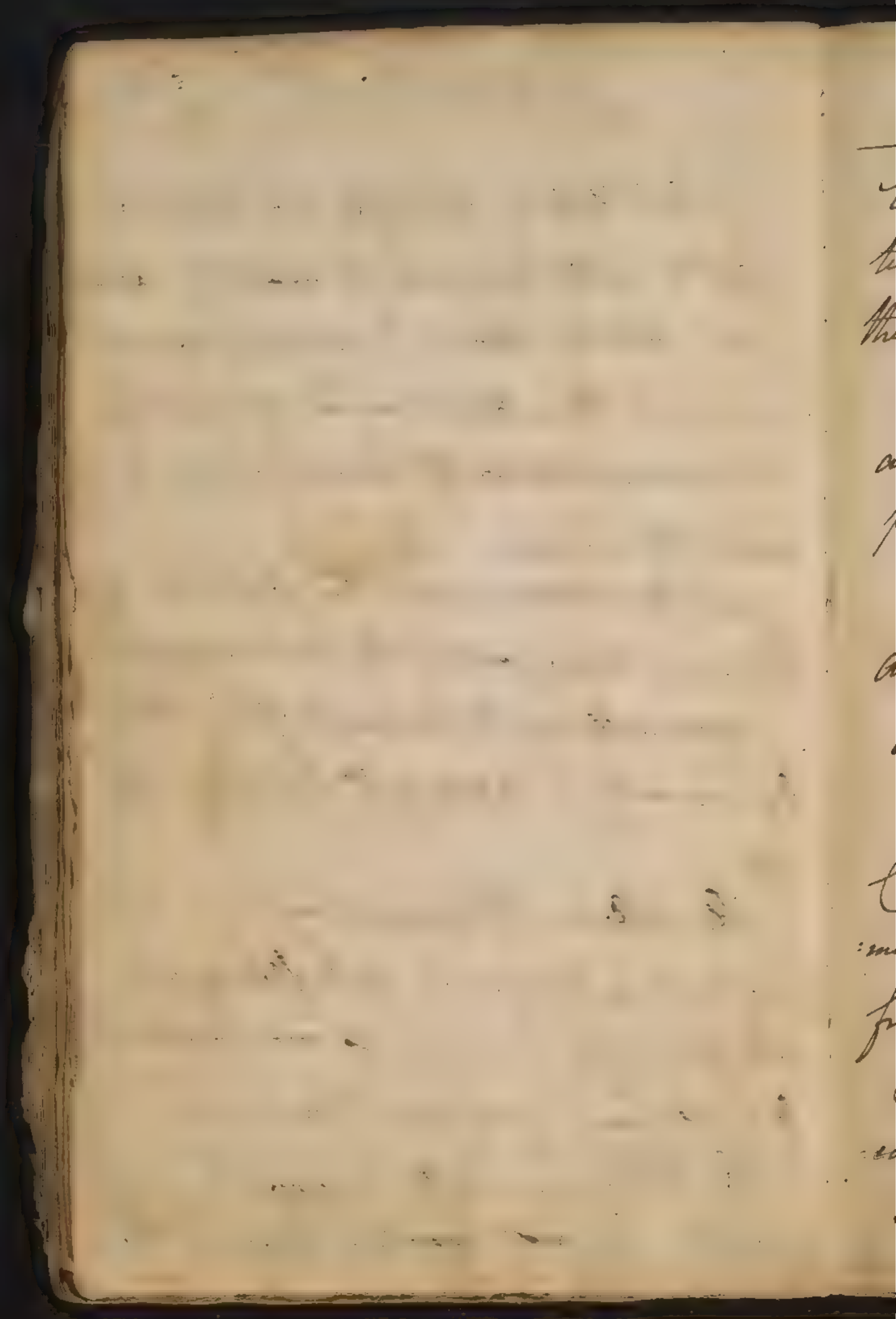
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The 1st Class the Pyrexia is a natural Class & will therefore be readily admitted. All the Orders w^{ch} it includes comprehend those Diseases w^{ch} depend upon an increased action of those powers w^{ch} move the Fluids.

in the 1st Order under the Definition of Fever I have added the word primario. - you will see the propriety of this addition by consulting § 848 of Dr. Gaubius' Pathology.

The 2nd Order Phlegmasia ought to comprehend a Definition of Inflammation but this would be foreign to our purpose & would have restricted it too much.

The 3rd Order you will perhaps think incomplete in not comprehending the



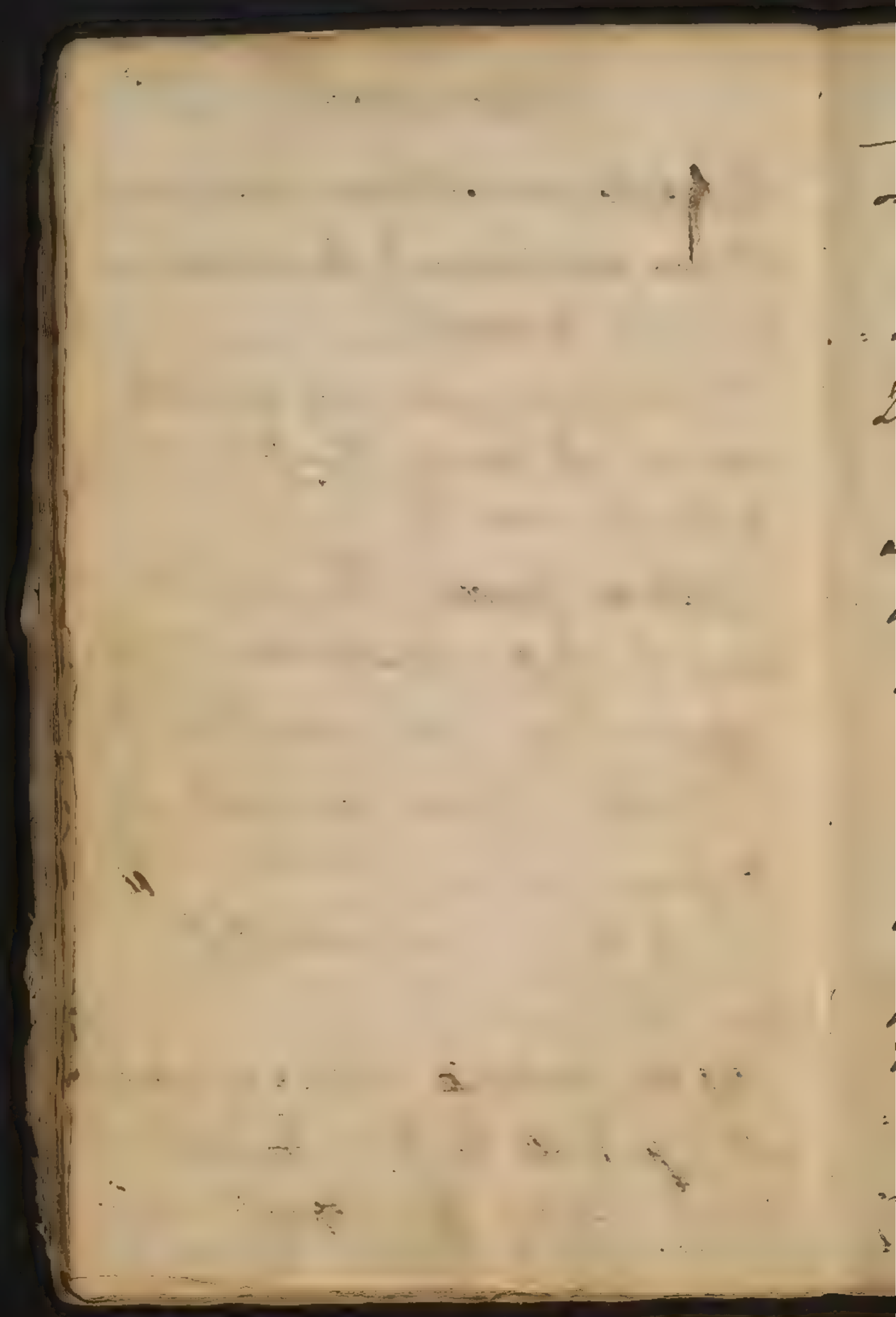
Erysipelas or Anthrax, but I shall tell you my Reasons for omitting them here presently.

The 4th & 5th Orders are very generally attended wth Fever & therefore come properly under this Class.

Class II. Neuroses. Physicians disagree about this Class. the Definition I have offered I hope will include them all.

The Orders I have placed under this Class are not new, but the Arrangement of them is somewhat different from Lauvage.

Class III. Cachexia. This is a very difficult Class, & all the Orders brought under it are included from dogmatic views



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or from notions of proximate causes.

Order 1st maies. I believe seldom ca-
: is ts. it is rather a Symptom of Other
Diseases as we shall hereafter show.

Order 2nd the Intumescences shall include
all the species of Dropsy, as they all
depend in some measure on one
common Cause.

I told you before y^d. I did not intend
to treat of the 2nd part of the Causes
of Diseases in our plan. You will
find them accurately pointed out
I divided by Dr. Gaurius in his Pathol.
: gy under y^e Head of "morbi folido:
rum Continuentium", & morbi Instau-
: mentarii"

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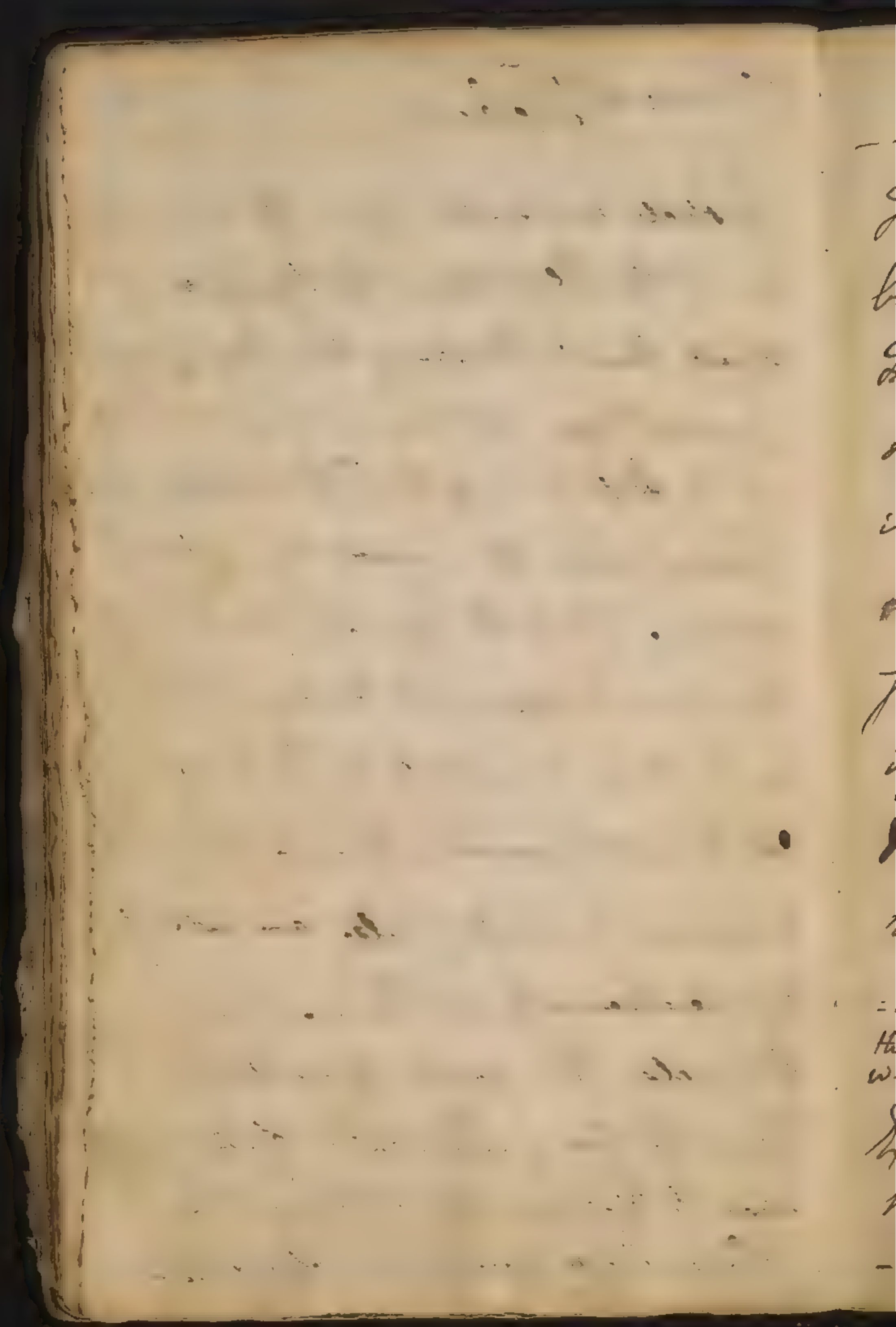
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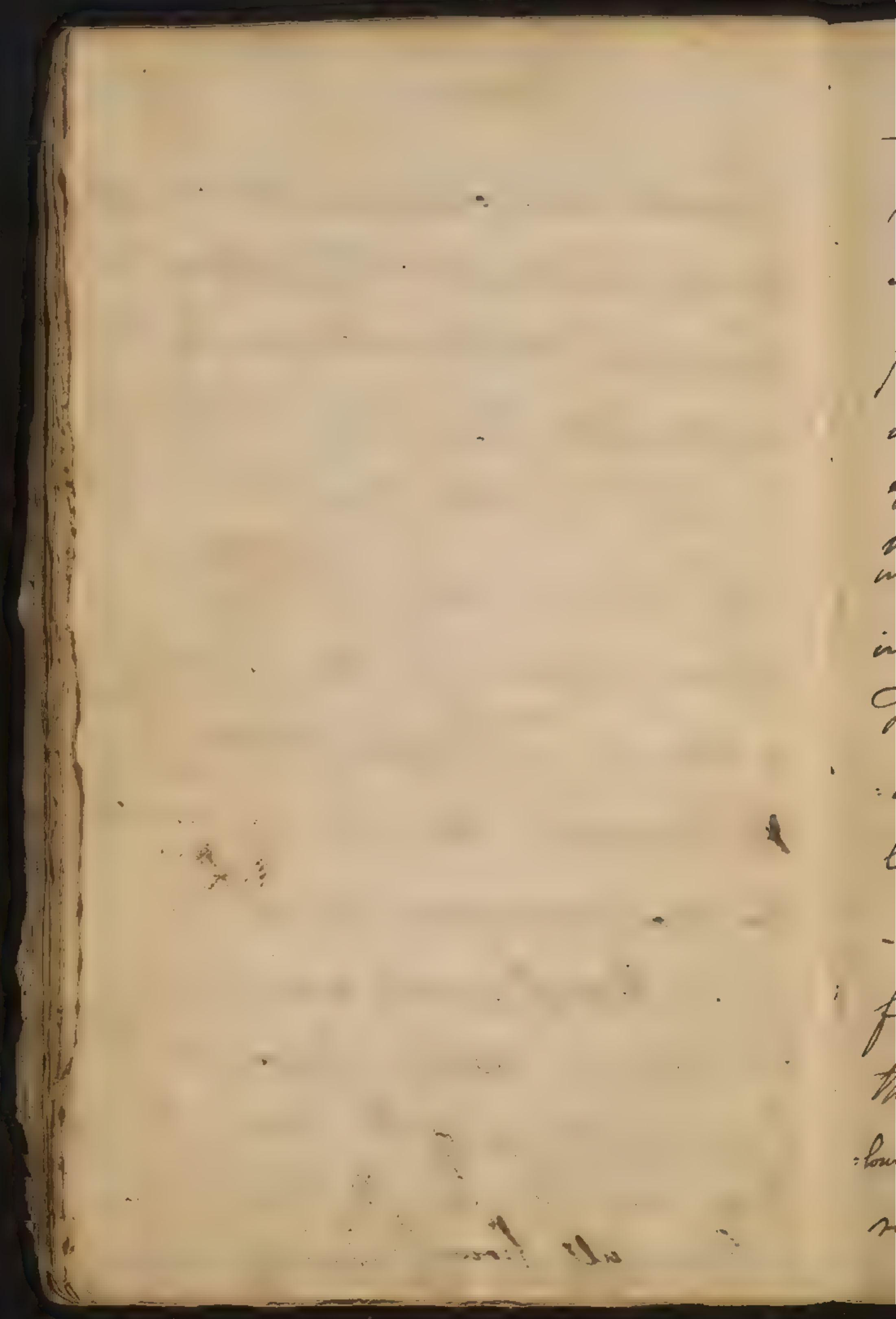
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I shall now enter upon the Consideration of the ist Class viz: the Pyrexia. I shall omit treating of this Class in a general way, but proceed immediately to the Discussion of the ist Order viz: the Febris where the Pyrexia do uniformly attend. It is the great Advantage of Nosologia Methodica to distinguish Diseases by those marks only ^{ch} are essential & pathognomonic. Pyrexia therefore & even a Quicksneep of Pulse are not sufficient to characterize Fevers. Something else then must be called in. I have therefore in Imitation of Sauvage chose to distinguish it likewise by the Horror ^{ch} so universally attends Fevers.

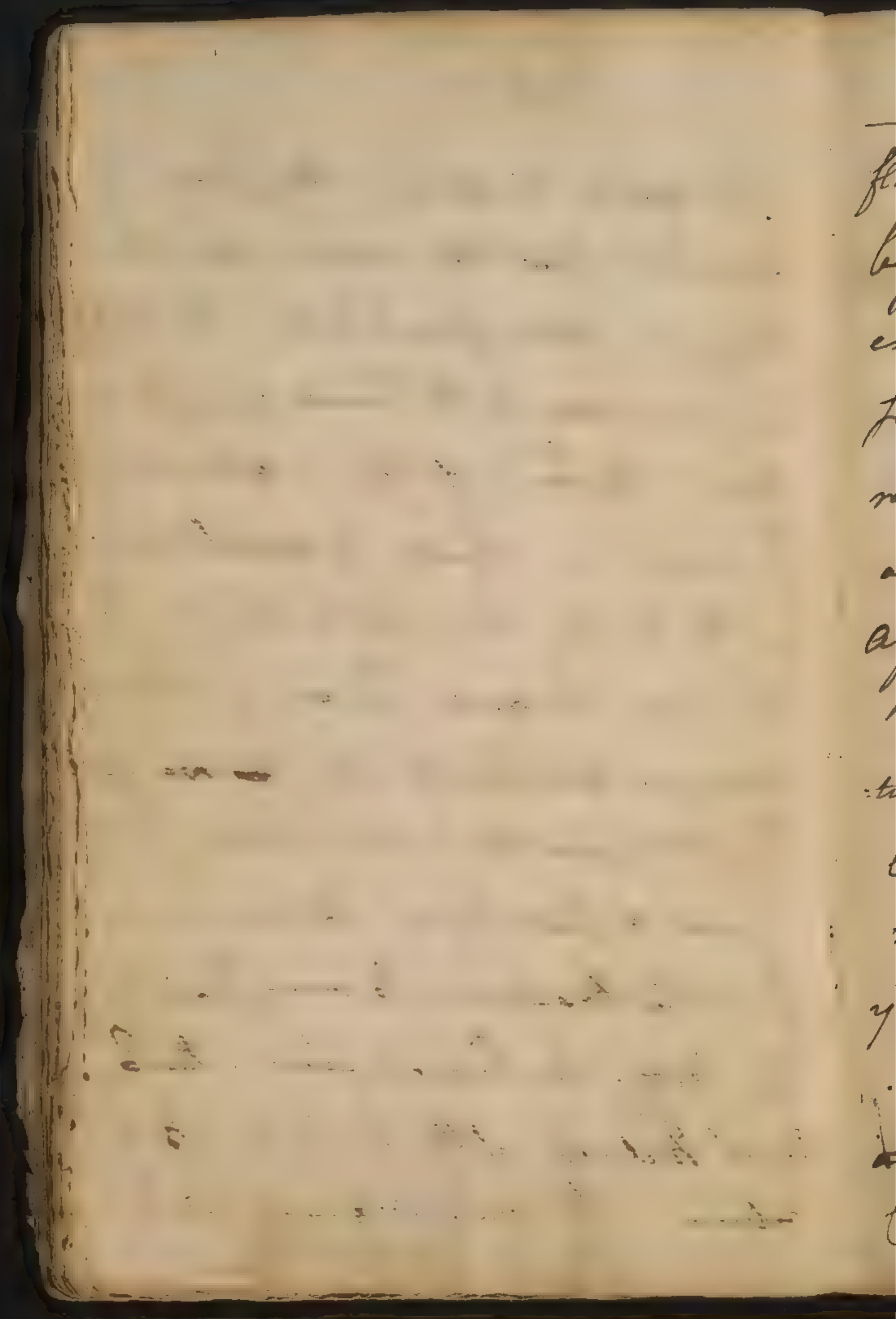


To guide us in our Distinctions we shall briefly point out the Symptoms of a Fever, & for the sake of Perspicuity I shall select that Species of Fever which is called Intermittent.

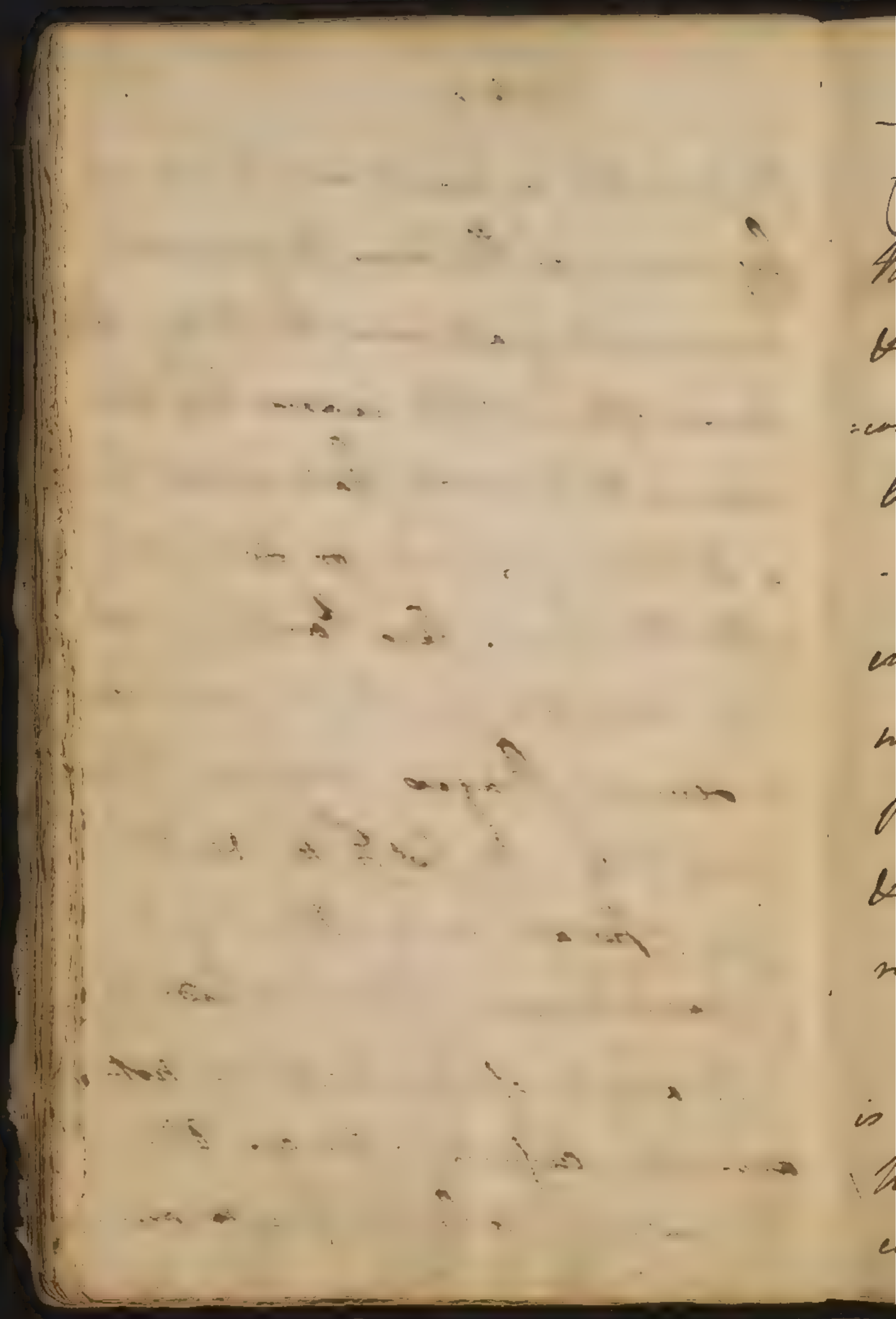
This Disease comes on wth Lapsitude stretching & yawning. This Lapsitude is attended wth sluggishness Indolence & Inactivity. The Patient is unable to stand or exercise himself as usual. These Symptoms are succeeded wth Palenes, which begins in the Extremities & tip of the nose. The Body now shrinks - the skin contracts - Rings fall from y^e Fingers. The



Red vessels disappear. the skin is
shrinked, but the nervous papillae
project like Goose flesh. the Body
is now cold to the Touch especially the
Feet. this sense of cold is attended
wth creeping thrills w^{ch} are felt chiefly
in the back. this Cold is attended wth
Tremors. Rigors w^{ch} are most vi-
sible in those parts where the ~~the~~ are
least supported as in y^e Lower jaw.
- now a Heat begins to spread itself
from the Praecordia to every part of
the Body. the Tremors cease. the Co-
lour & Fullness of the surface of y^e Body
return - the face becomes red. &

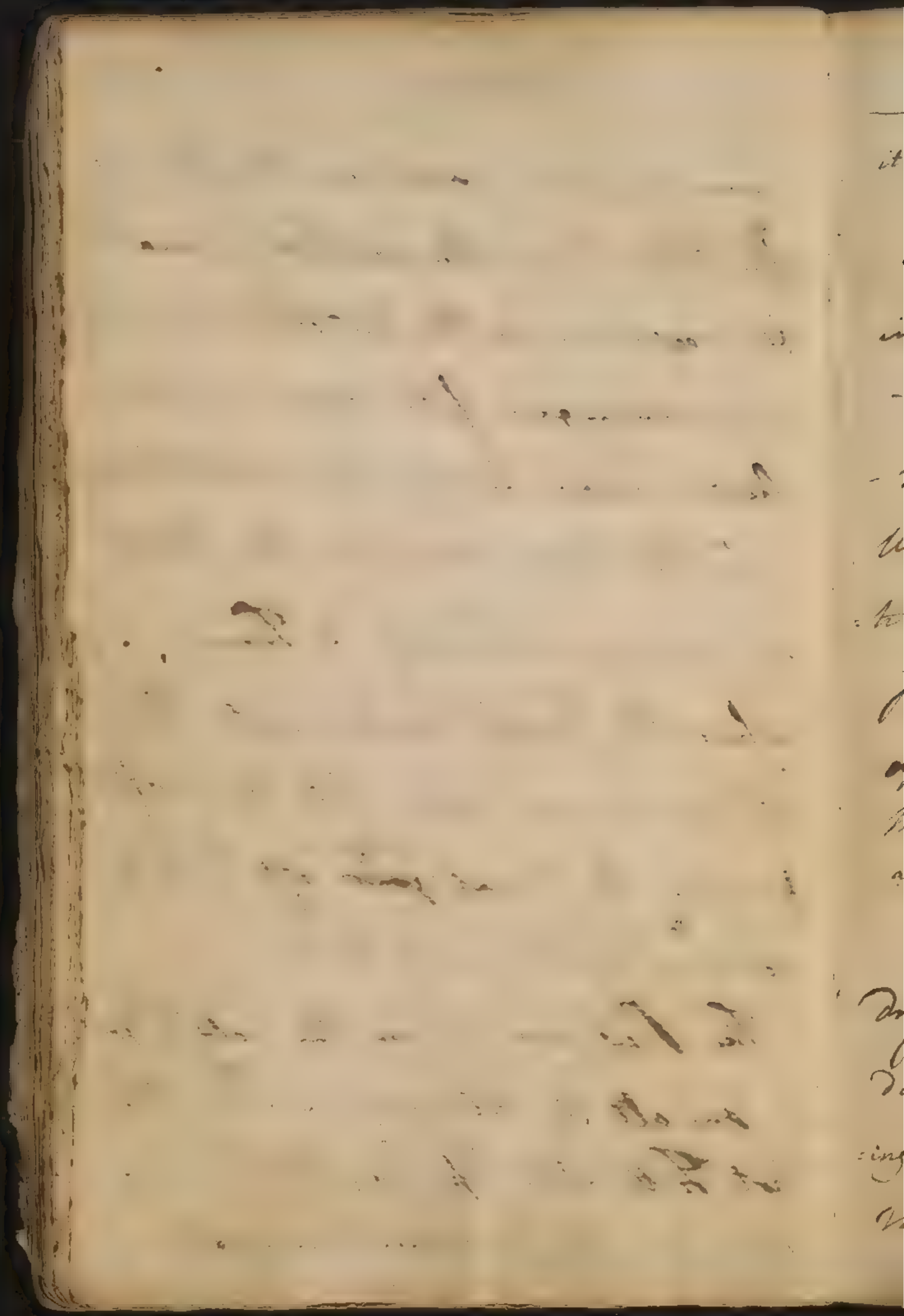


flushed wth heat. a sweat now breaks out
beginning in the face, & gradually
extending itself all over the body. the
sweat after a while ceases. & y^e body
returns to its usual state except y^t
a Debility remains for some time
after the fever. This Paroxysm as
thus described has been divided in
to several stages. such as the
Cold Trill - the hot Trill - & the
time of sweat, or in other words
y^e Stadia Frigoris - Caloris & Sudoris.
The Limits of these Trills are not
exactly defined. there are other
Circumstances to be taken into our



Consideration such as the state of
 the Pulse ^{is} in the cold Fitt is weak
 & irregular. in the hot Fitt it be-
 comes stronger, fuller & more regular,
 but is manifestly contracted & hard.
 as the Heat advances, the Pulse
 increases in Fullness & Force.
 when the sweat breaks out, the
 Pulse becomes more full but soft
 & when the sweat ~~goes~~ ^{goes} off y^e Pulse
 returns to its usual state.

The Respiration in the cold Fitt
 is small & labourious. in the
 hot Fitt it is less frequent & more
 easy, & as the preceding Fitt returns



it becomes more easy & natural.

The functions vary in these Febrs.

in the cold Febr they are all Obstructed.

- the Skin is dry - the Mouth parched.

- the Bowels costive - no or very pale

urine - But in the hot Febr the func

tions are gradually opened & in the

Stadio Febris the Bowels are

opened. the pores are relaxed, & y.

Mouth becomes moist, & y urine drops

a catenitious Sediment.

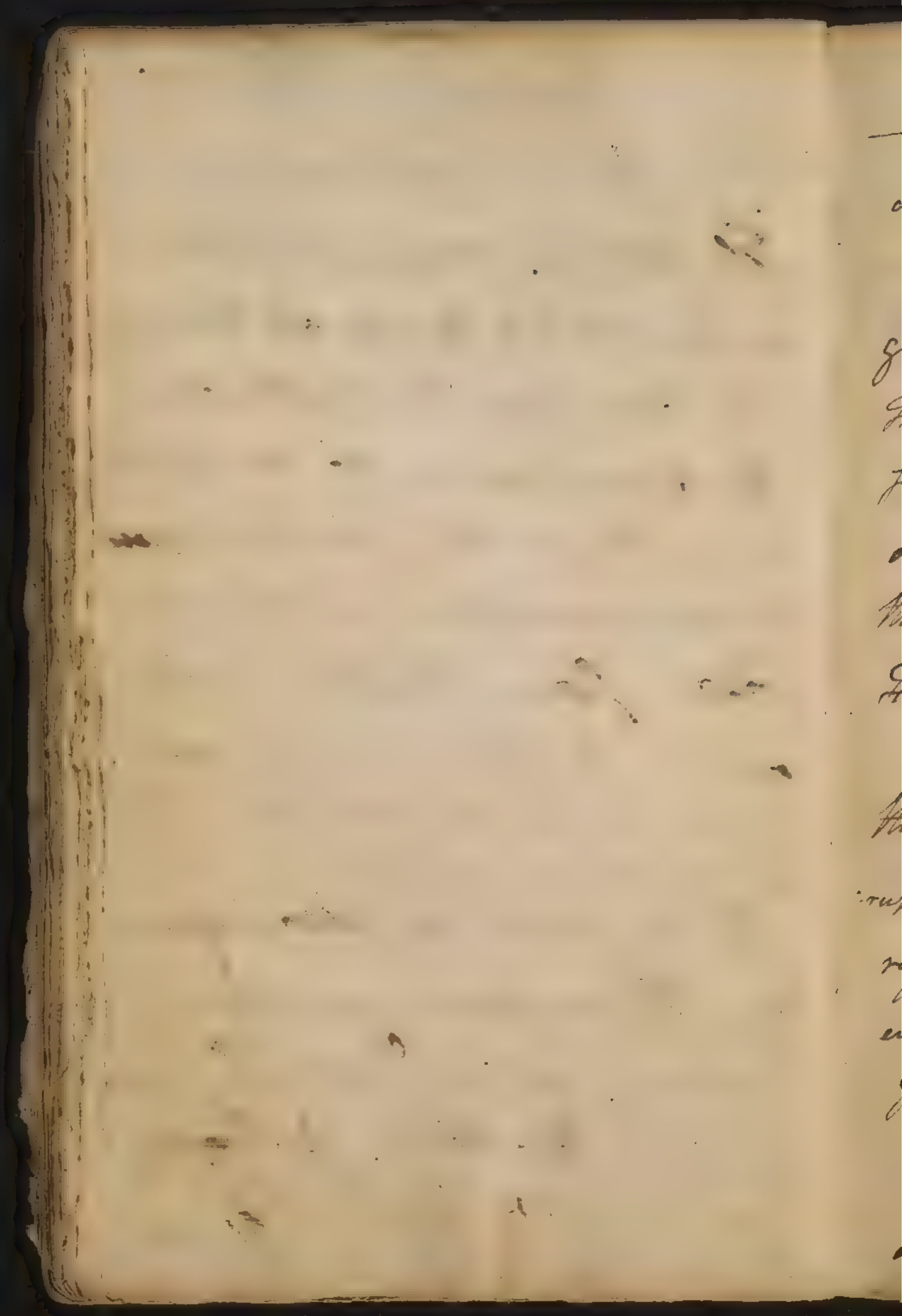
In the Cold Febr all Ulcers appear to

dry - Tumors detumescere & some

disappear, but as y hot Febr & sweat

ing return these Ulcers pour ^{out} ~~out~~

new Matter & the Tumor again

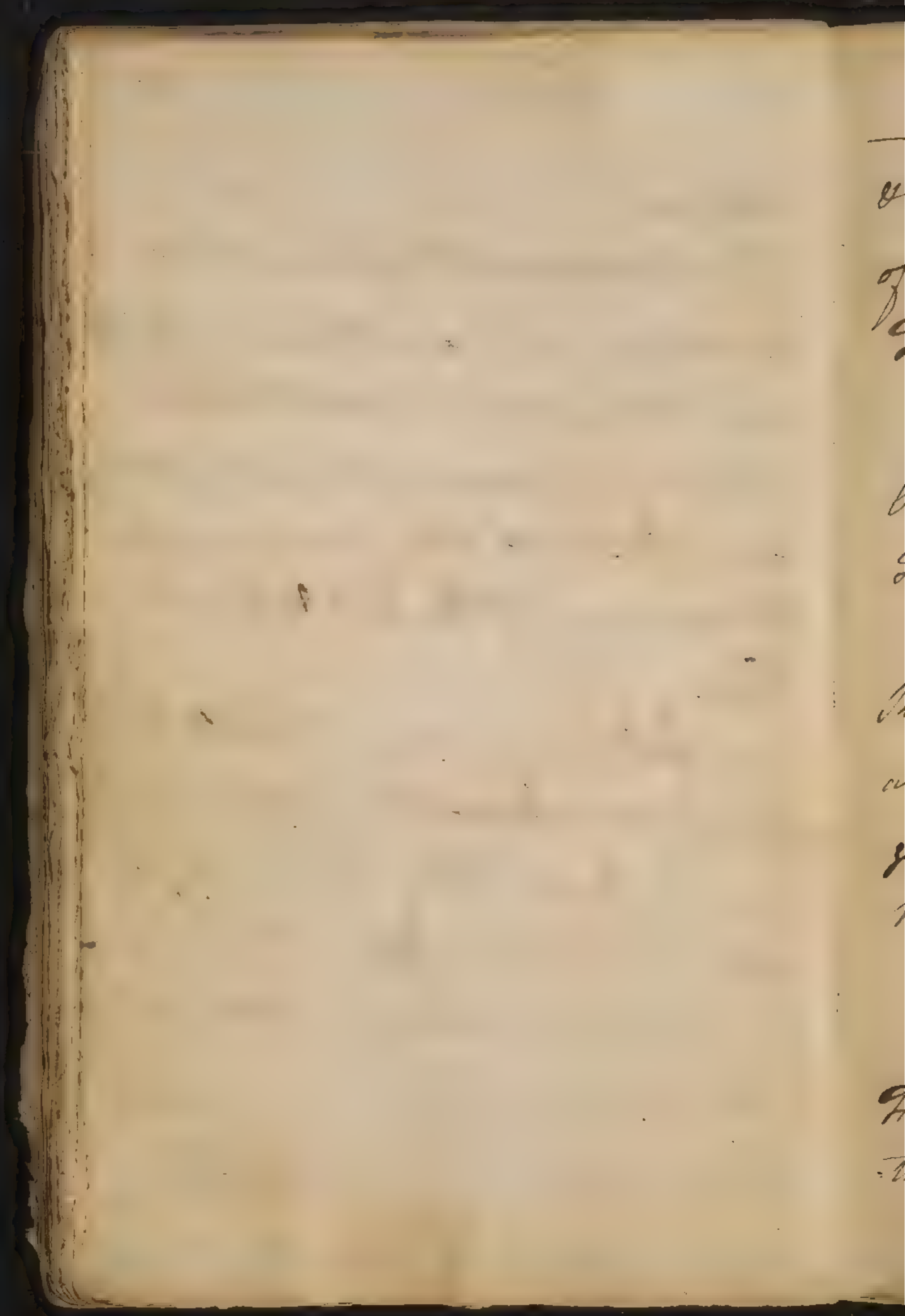


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The Functions of the Stomach are greatly changed. an Aversion to all Food takes place, as also to Tobacco Snuff &c. a vomiting sometimes comes on. But all these disappear at the Approach of the hot & sweating Litt.

a Debility continues thro all these three Stages. Sensation is greatly interrupted in the cold Feet. the Eyes & Ears refuse to perform their Office. & the patient even becomes insensible to a ~~red~~ red hot Iron applied to the Feet.

at the Approach of the hot Litt &c a morbid Sensibility takes place to light



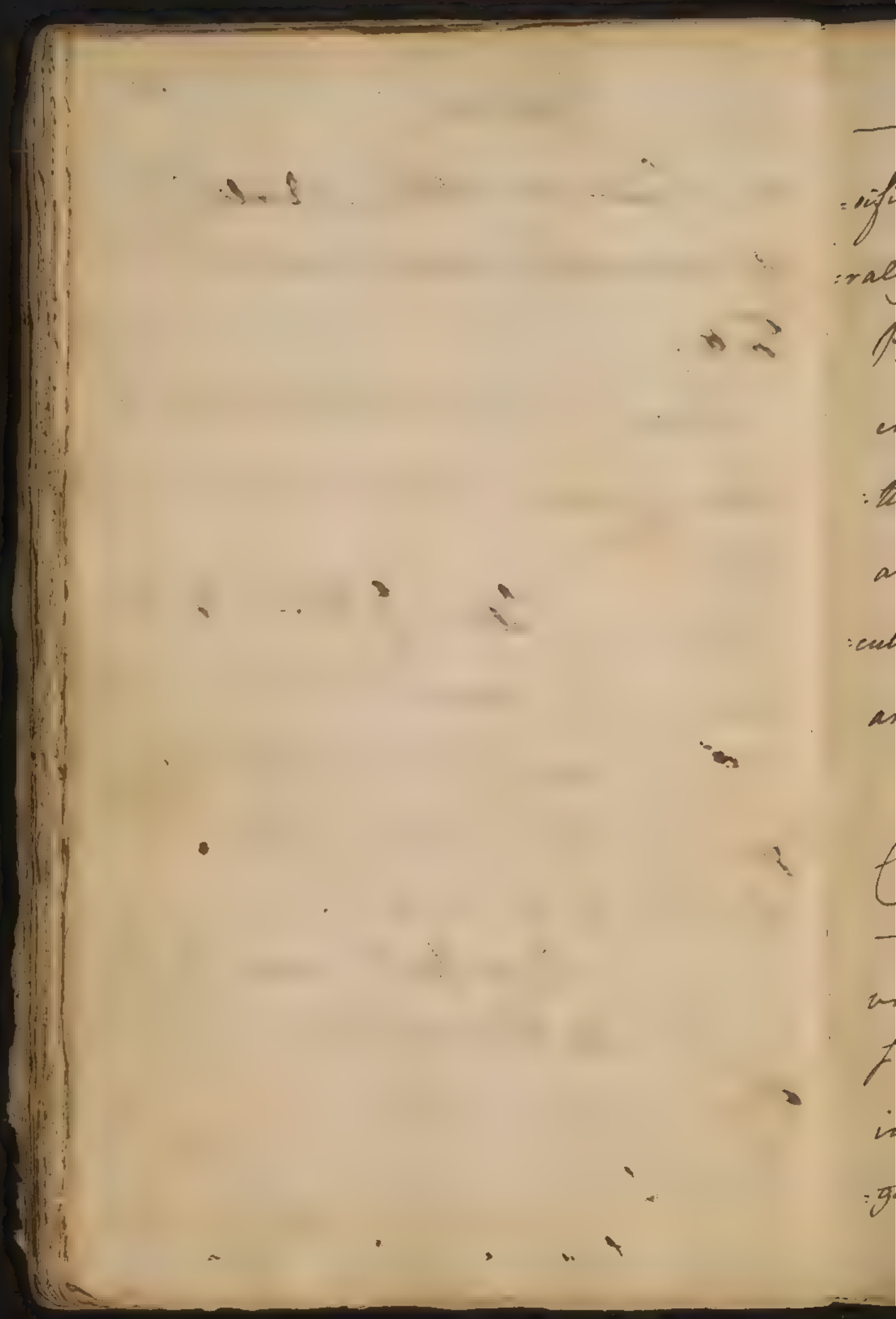
&c. Convulsive Tremor, & all Train
 of nervous Symptoms appear in ^{the} cold
 Pitt.

Thirst is common to all these 3 stages
 but is generally greatest during the hot
 Pitt.

Pains are felt in ^{the} Head - Back &
 Joints. They begin in the cold Pitt but
 are most violent in the hot Pitt, &
 generally keep pace wth Delirium & a
 throbbing of the Temples.

Death for the most part hap-
 pens in the cold Pitt, or if it is in ^{the} hot
 Pitt some Symptoms of the cold Pitt re-
 turn again.

These Symptoms are all greatly diver-

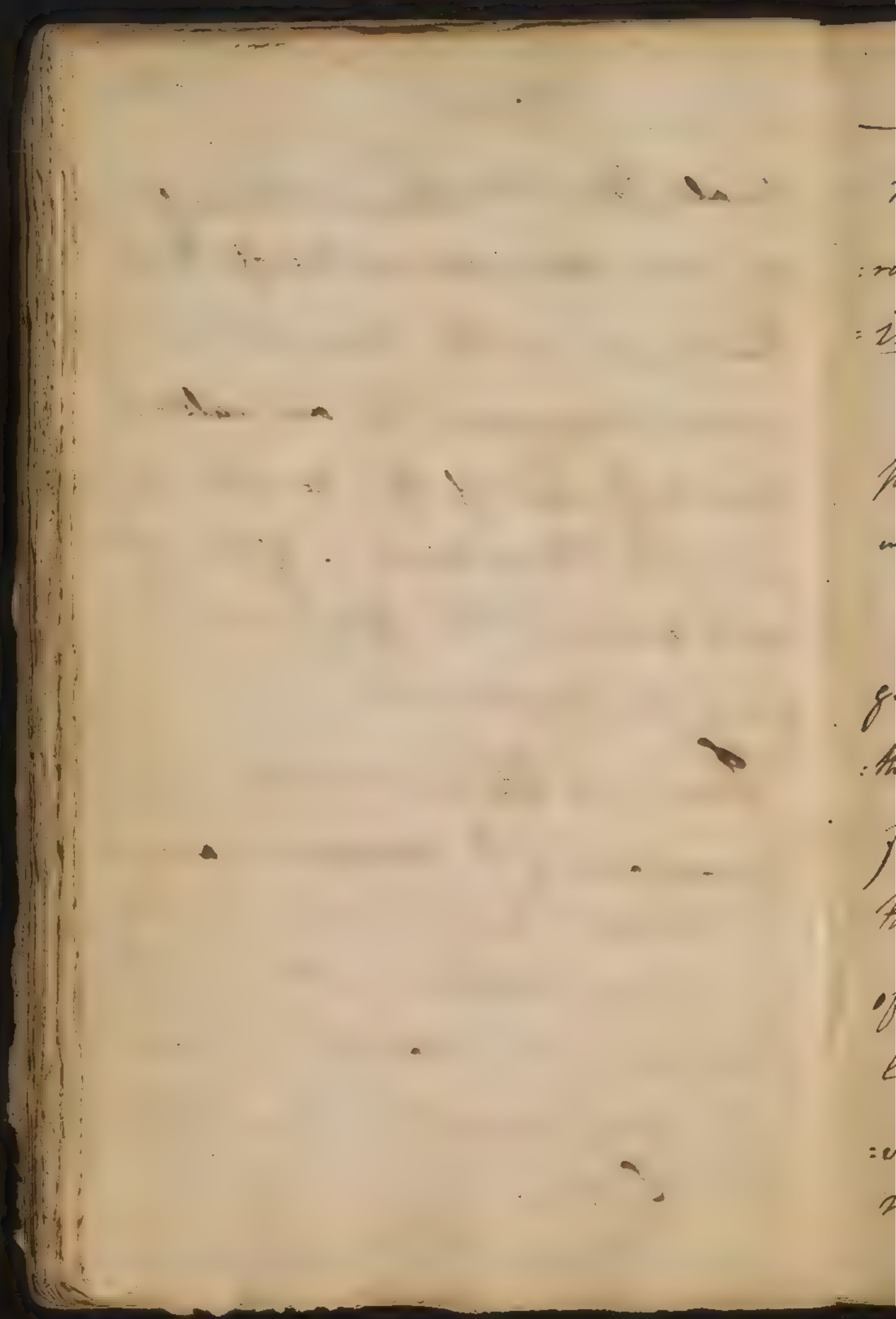


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ified all Idiopathic Fevers have generally more than one or two of these Paroxysms. if they terminate in an entire Apyrexia they are called Intermittent, but if they do not they are called Remittent. if it is difficult to distinguish the Apyrexia they are called Continuals.

Fevers are likewise distinguished by Circumstances of the ~~Paroxysm~~ Paroxysm - the Pulse. Respiration & Tremor vary in the cold Febr together th w: the Sensations. the Heat & Thirst vary in the hot Febr together th w: the whole sanguiferous System.

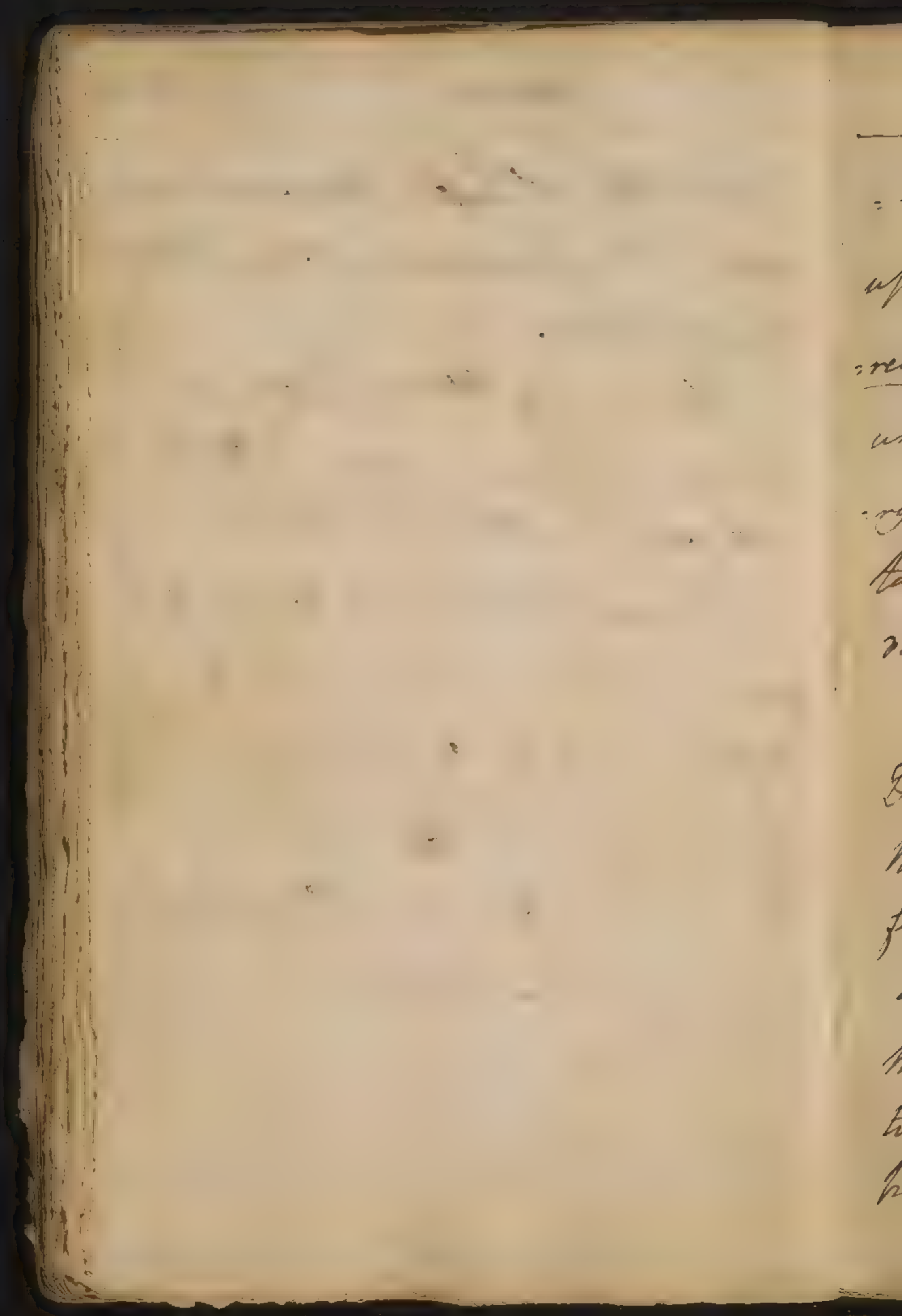
These are the general Facts in



the history of Fevers & lead us natu:
rally to the Investigation of their prox:
imate cause.

This is a very abstract Inquiry nor ^{do} I
pretend to remove every Difficulty y:
will occur in this Investigation.

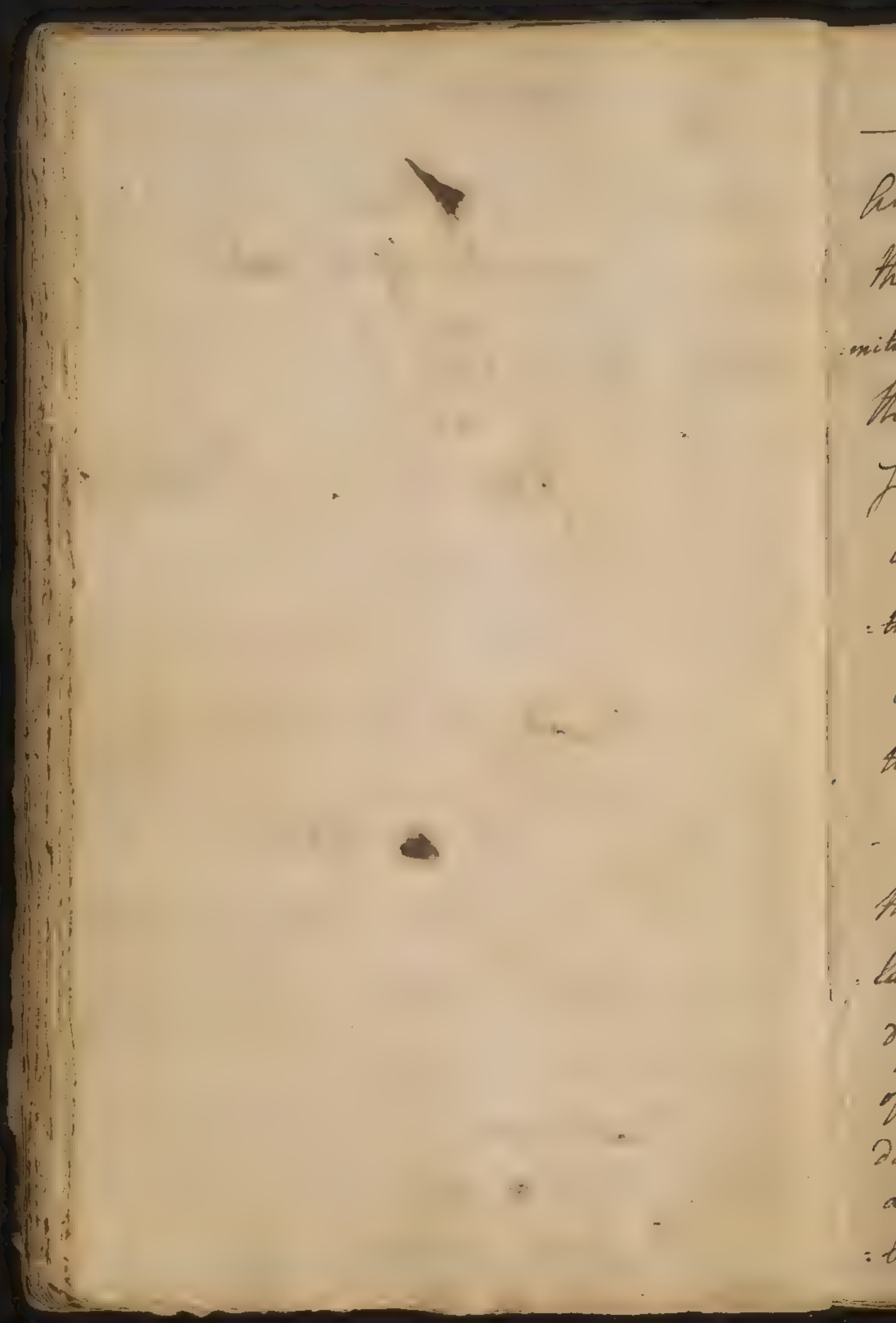
I shall omit taking notice of the
general Theories of Fevers th w: have be:
come prevalent in our Schools. When I
first began to teach Physics in
this University my Colleagues spoke
of Phlogiston w: a kind of Horror, &
looked upon me as a chemical Inno:
vator or a mere Paracelsus, but
now most of them have embraced it.
even Banowiten himself has reje:



ted the notion of Fevers depending upon an Affection of the Fluids. Willi & Hoffman first pointed out to us that Fevers depended on ² primaries Affection of the nerves, but I shall take no notice of their Opinions, & deliver my own as plain as Jean.

The Lapsitude the Stupor - the Drowsiness & Coma all show us that the Sensorium is ~~is~~ Affected in the first Attack of Fever, & depend upon a diminished Energy of ² the Sensorium. This diminished Energy extends even to the Heart hence the small weak pulse & the paleness of ² the Skin.

The Blood vessels especially the



Arteries are contracted distant from
the action of the Heart, & while $\frac{2}{3}$ Extre:
mities of the Arteries are contracted, hence
the Suppression & Obstruction of all the
Secretions. This Constriction may be
accounted for from the simple Plas:
tinity or Contractility of the Extremities
of the Arteries without having Recourse
to an increased Influx from $\frac{2}{3}$ Sensorium.
While the ~~blood~~ small Arteries are
thus contracted the Blood is accumu:
lated in the larger Arteries hence the
difficult Respiration &c which we spoke
off before. The Increased action of $\frac{2}{3}$ Heart
does not depend upon $\frac{2}{3}$ Stimulus of this
accumulated Quantity of Blood, for its sensi:
bility is greatly diminished. —

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These Phenomena are succeeded by
a considerable Increase of the Heart's
Action. the Pulse becomes stronger &
fuller, & this is occasioned, ^{in some measure} by γ cold
Fitt. But in ω : Manner? This is a
very difficult Question. we must refer it
to the ω : Nature Medicatrix ω : Dispo-
sition the System to recover its Balance when
destroyed. I do not suppose this ω : Nature
Medicatrix depends upon γ action of a
rational Intelligent principle, nor upon a
mixed Action of the Soul & Body and Galen
~~has done~~ ^{has done} Imagin that it
~~depends~~, but, Depends merely upon the
Mechanical Operation of our Constitution
& flows from ω : is called physical necessity.
2nd ^{Phenomenon} this ~~action~~ may be illustrated by

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a familiar analogy. Sedatives take off the Excitement of the Sensorium but when taken in a moderate Degree rather excite the Action of ^{the} Sensorium which tends to remove the sedative Impressions induced by the narcotic medicines.

Does the diminished Circulation of ^{the} Blood in the small Arteries induce Cold, and does a Constriction? If this sensation of ~~the~~ Cold produces the Reaction of the Sensorium? ^{has been maintained} This ~~is~~ ^{is} from Cold exciting the increased Action of the System, & inducing all the Phenomena of Fever. Cold then ^{must} be a necessary step in exciting the increased Action of the System. But some Doubts

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may be offered to this Conjecture. all
 active Hemorrhages are preceded ^{the} w a
 sense of Horror & Cold. now Hemorrhages
 are generally attended ^{the} w Conges-
 tion. this is most evident in y face
 before the Eruption of Blood from y
 nose. After Child Birth too we see a
 Fever attend the Congestions th w are formed
 in the Breasts previous to y Lactation of
 Milk. we see Congestions in y Rheumatism
 & Angina before the Horror & Other is
 Symptoms of Fever come on. I have
 seen a bilious or calculous Concretion
 bring on the Symptoms of Fever. in all
 these Cases ~~the~~ Congestion the Sensorium
 was excited to remove an uneasy Sensation.

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Now all this tends to show ² that the Reaction
of the Sensorium does not depend upon
Cold, but that the Phenomena of Fever
depend upon the Reaction of the Sensorium
already begun. hence we often see
Fever exacerbated without any cold Pitt.

But why does the cold Pitt so often do
necessarily intervene? - I do not think it
a necessary Intervention Altho' it is conducive
to bring on the Symptoms of Fever especially
the increased Action of the Heart & Arteries
& hence the Reason why cold Bathing has
been found so useful in certain States of
Fever. The Cold then is rather a part
of the hot Pitt, & occurs in the Reaction
of the Sensorium in w^{ch} the hot Pitt exists.

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This is the Reason why the more violent ^{ly}
 Cold Pitt is, the sooner the Putrid is ~~is~~
 formed, & the sooner the Paroxysm is
 terminated by Heat, & why ^{ly} most
 dangerous Fevers are generally ushered
 in wth little or no Chilly Pitt. Remitting
 Fevers where no Pyrexia appears are
 more dangerous than Intermitting Fevers
 from the Circumstance of their being attend-
 ed wth no cold Pitt. Those Recursions of Fe-
 vers w^{ch} prove critical are always introduc-
 ed by an evident Cold Pitt. I conclude
 then that the Cold Pitt of Fever depends
 entirely upon the Reaction of ^{ly} sensorium.
 I do not pretend to explain any further
 the Reason of the cold Pitt. we must refer

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it to a general Law of the System, or to
the *vires nature medicatrices*. it depends
we said on the Reaction of γ Sensorium.

The Sensorium is a Centre of Motion, but
has no motion in itself. all γ Actions of
the Sensorium then arise from Impulsi-
ons made on it, so that ~~the~~ every Action of
the Sensorium ought to ^{be} considered only
as a Reaction. to illustrate this still further
we must consider the Operation of Lida:
tives in a more extensive manner. Lida:
tives then do not act on γ Centre or inmost
part of the Sensorium, but act partially
only. the part then on ^{wh} they do not act
reacts again in a short time, & thus
restores the whole to an Equilibrium.

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Cold is a sedative of this kind. When applied to the Gut it induces a desire to discharge ^{the} Urine & ^{the} Stools w: may depend upon the Reaction of the Medulla Spinalis, upon ^{the} w: the Cold at first exerts its Sedative power. Not only the Cold is an active power of nature, but even the Tremors likewise & hence we always find them proportioned to the Action of the Heart & Arteries. ^{the} Afterwards follows. Altho' ~~any~~ ^{the} cold ^{the} Pitt depends upon the Reaction of the Sensorium, yet I will still allow that It may, when bro't on have some Degree of Stimulus w: may contribute towards exciting the Action of the Heart & Arteries.

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The Resistance to be overcome by
the Sensorium when ² Cold is induced
is a Spasm on the Extremities of the
Capillary Arteries. an Atonia of these
Vessels disposes to the Production of
this Spasm ^{ch}. Atonia is not on by the
Want of Antagonist Power or the Blood
being propelled in to them. This Atonia
is always greatest in proportion to the
Distance of any part from the Heart. hence
the Reason why the Surface of ² ~~the~~ this is
the chief Seat of Spasm. This Spasm continues
for a considerable time during the hot Litt.
I am ^{it} suppose ~~this Spasm~~ constitutes
the Fever & that when this ^{is} overcome the
Fever is cured. This was formerly my

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Opinion, but we often see a Debility
& want of Excitement [&] in ^{the} perisperm
preclude the spasm, ~~the~~ this must be
removed before we cure Fevers. The
hot Pitt is kept on by the spasm &
is supported by it, it is therefore a
necessary Intervention in ^{the} Cure of
Fever. The spasm then is not yet
cured itself altho the Cure of Fevers depends
upon the Removal of it. The spasm then
is neither the fundamental Disease nor yet
the Removal of it, but is the Effect of the
first & Cause of the last. Fevers there-
fore consist of 3 parts Debility - spasm &
increased action or hot Pitt. I will not

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say how Debility brings on Spasm or
how Spasm brings on a hot Tilt.

The Continuance of each these are establish-
ed by certain Laws of the Economy.

The first Excitation of the Sensorium will
be in increasing the Action of γ Heart
& Arteries. These will react on the
Sensorium & contribute towards its
Excitement which enables it at last
to overcome the Resistance on γ Extremi-
ties of the Arteries. The whole Cure of
Fever then consists in restoring the Energy
of the Sensorium. it begins to its Reaction
itself; this we move from the Phenomenon of
Syncope. but a proper State of Excitement
is brought on by the Action of γ Heart &
Arteries.

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This finishes our proximate cause of Fevers.
We have found it consist of 3 parts Debility Spasmodic & Hot Titt. They all depend
on each Other & succeed each Other in
the Order I have mentioned. The first induces
the second, & the second the last. I do
not say each of these stages are here. been
speaking off subist. Separately. They Others
ist all at Once and are confounded with
each Other. Fevers then consist in 1st an en-
creased Heat, 2nd increased pulse when they follow
Horror or a Chilly Titt. ^{for} unless they
are preceded by this, they cannot belong
to the Class of Pyrexia.

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The Spasm may arise from many Causes on w^{ch} the variety of Fevers ~~are~~ depend. It may depend 1st upon Congestion i.e. an Afflux of a greater Quantity of Blood than can be transmitted thro' Blood-vessels. This kind of Spasm occurs in the morrhages. 2^d upon acid Matter poured upon ~~the~~ the Extremities of the Nerves as in γ & anthermatia. But I doubt whether Spasm takes place here. a Congestion formed I grant w^{ch} may perhaps occasion Spasm not only in the part where γ Crup^{er}tion appears but all over the System. I now turn now to consider our first Order or what is properly called Fever.

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It is the different states of Debility & Power
of the system occasions the different periods
of Fever. The Duration of each Paroxysm of
Fever depends upon the nature of the
Fever. A Fever is seldom terminated by one
Paroxysm. It depends upon the Nature of the
Fever whether it still continues in the
system. here I must define two Terms
viz. Interval & Intermission. The Interval
is from the beginning of one Fit to the beginning
of another. The Intermission is from the end
of one Fit to the beginning of another.
The shorter the Paroxysm the longer the
Interval, & the shorter the Interval
the longer the Paroxysm. Thus the Paroxysm
of a Quotidian is 10 hours of a

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Tertian 8, & of a Quartan 6 hours. I
 speak this at a medium. there may be
~~very~~ many exceptions to it. There are ma-
 ny causes w^{ch} protract then paroxysms.
 Thus a Tertⁿ may be protracted beyond 24
 hours, & in this case the Fever does $7\frac{1}{2}$
 name of an Intermittent. There can then-
 fore be no Intermittent if a Paroxysm con-
 tinues beyond 24 hours. Our System is perpetu-
 ally undergoing Changes. the vital principle
 in the Lencorium is always rising & falling
 in its Oscillations, but appears to be in
 its two Extremes One at least in the
 24 hours. This must be resolved into the
 vicissitudes of Sleeping & Waking. any Labes

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then disposing to recur will from these
 Revolutions of our System be liable to in-
 duce a Return of a Fever again. Hence we
 find they generally return at a period
 - thus quotidians come on in ^{the} morning
 - Tertians about noon - & Quartans in ^{the} afternoon.
 Every Paroxysm then of Fever
 must run its course in the 24 hours &
 suffer at least some Remission. Unless
 an Intermission intervenes in ^{the} 24 hours
^{they} ~~it~~ can not occur at all, but from ^{the} force
 of Habit & ^{the} vicissitudes we shake off the Fever
 goes on to be renewed every 24 hours. But
 this seldom happens, & therefore I believe
 there is no such thing as Continual Fevers. -

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This I assert from Observation as well
as from Reasoning a priori. This there-
fore shows ^{the} propriety of ^{what} we said before.
the longer the Paroxysm the shorter the
Interval & vice versa. The Continuance
of a Paroxysm will depend too upon ^{the}
greater or less action of the Spasm, &
this will be influenced by Debility in its
different Degrees. the greater ^{the} Debility the
less the Spasm - Chilly Fits - Horror Tremor
&c. this Case occurs in the Nervous or
Malignant Fever. but in Intermittents
the Debility is less - the Spasm more active
& hence the Paroxysm becomes shorter.

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Let us now consider Pyrexia as
accompanied ^{1st} Phlegmonia. here is
no Debility taking place. The fever is
generally proportioned to the Irritation.

But why is not each Paroxysm in
this case terminated sooner? Because the
Congestion occasioning the fever is
not easily removed. hence all inflam-
mations are of the continual kind. in the
Congestions proceeding Hemorrhages the
Pyrexia always continues till the
Congestion is removed. In the Congestions
tending to Suppuration the Pyrexia ceases
when the Fluids are effused but not
before as then only ^{2^d} Congestion is removed.

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The Inflammatory Febris for such I shall call it! differs widely from Intermittent Febris in not being attended w: so great Horror - Tremors. The Inflamm: Febris is often topical, & consists in an encirculation of the vessels near to y^e place where the Congestion is formed. This Febris communicates an Inflamm: Diathesis to the whole Arterial System. But in Inflammatory Febris, the Action of the Furor is communicated chiefly to the Heart primarily ~~&~~ not to y^e Arteries as in the Case of the Phlogomania. In every Febris there are 2 circumstances to be considered viz Constriction & Irritation.

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The 1st produces the last, in such a manner as to stimulate the Sensorium ^{or} reacts again upon the Arterial System. These are not always proportioned to each other. When the Constriction is more violent than $\frac{1}{2}$ Irritation the Paroxysm will be long, the Reverse Case gives shorter paroxysms. The violent Constriction occurs in Inflamⁿ: Fevers. hence Intermitting Fevers when they partake of the Inflamⁿ: Disturbances are so easily changed into contin^g: Fevers. Very Irritation applied to the Arterial System increases the Pain in an equal Degree. Thus Cold excites Inflamⁿ: in the Arterial System, & of such

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a Degree as to be difficultly resolved. This then gives us another view of ^{the} Reason why some Paroxysms of Fevers are longer than Others.

Here a natural Question occurs. if a Pyrexia arises, ^{(tho'} not from debility or Phlegmania) what shall we call it? Such a Fever is excited by cold bathing. But this a transitory Affection & should not be admitted so as to form an Order. If ever th it is permanent it is accompanied w: Lurprine or Fever, but this brings it back to the Fevers arising from Debility or arising from Congestion being previously formed before the Body is ~~exposed~~ ^{exposed} to Cold. Do not direct Stimuli produce

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Purcya? if they do it is by first ex-
 citing Congestion ⁱⁿ w: reduces it to the
 Phlegmania. But ^{what} shall we say
 to ^{Exercise} Insolation & various acrid Stimu-
 li taken into the Body? I much doubt
 whether such Stimuli act directly in
 producing Fever. They produce a debility
 which disposes the Body to be affected w:
 Fever. The Insolation acts by exciting
 topical Inflammation. acrid substance
 thrown inwardly produce general Conges-
 tions & therefore the Inflam^y: Spasm.

does not increase ~~or~~ or an inordinate
 quantity of Food produce Fever? I
 shall answer this Question hereafter

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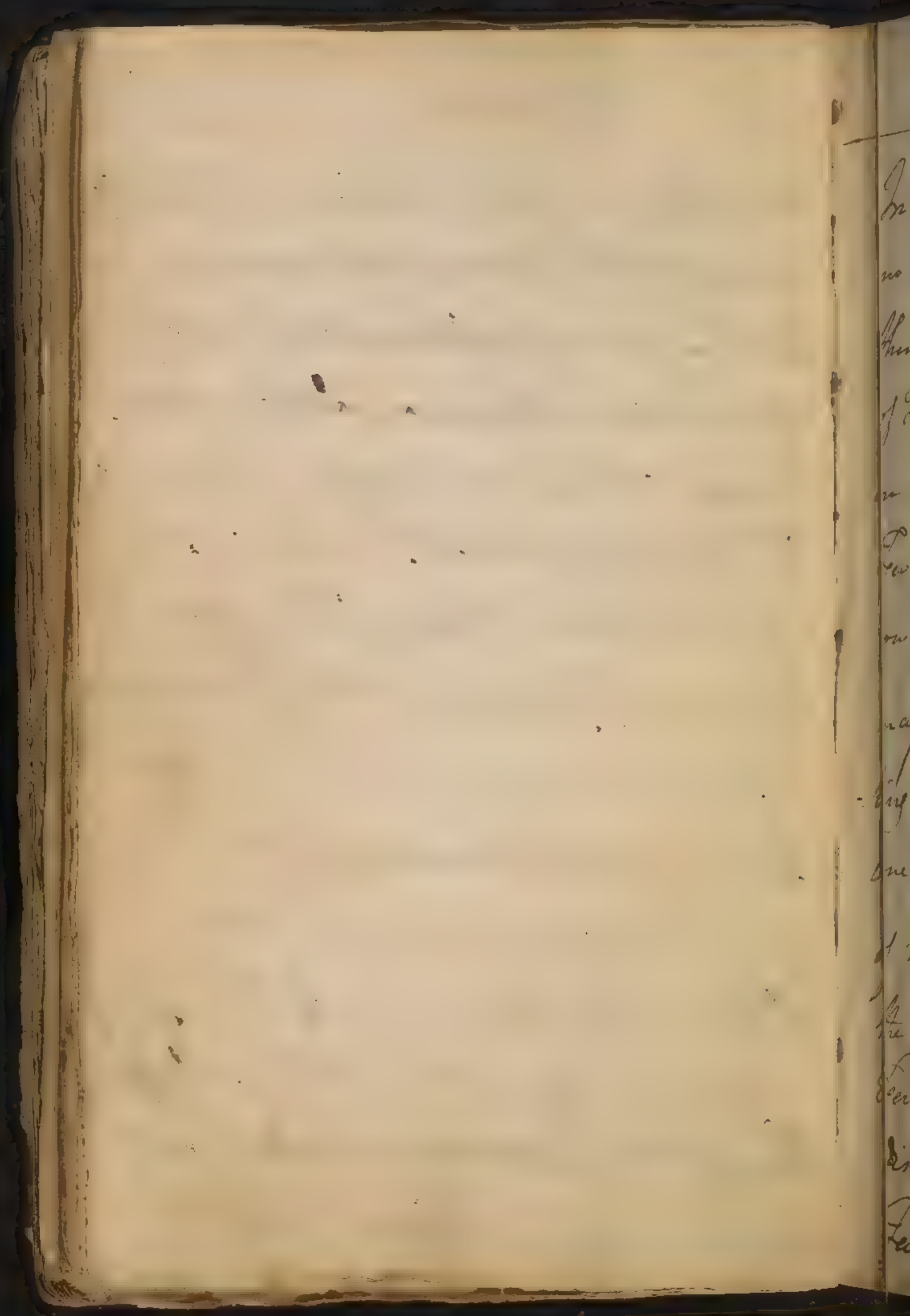
I conclude therefore that there is no
Foundation for establishing a new
Order of Pyrexia distinct from Debility or
Congestion. A moderate Degree of De-
bility w: any Irritating Cause ~~it~~ induces
~~the~~ a Spasm w: irritates the Heart
only & produces Inflam? Fever. &c.

I believe there are but two kinds
of Spasm viz: the Inflam? Spasm
& that arising from Debility alone.

The Spasm in the nervous Fever dont de-
pend on Debility alone. great Debility
occurs in Interm? Fevers. I suspect
therefore that all nervous Fevers have

§ This is confirmed by an Opera-
tion of Dr. Cleghorn who tells us
y² in all Interm³ Turnoth w^h became
continued he discovered evident
Marks of Inflammⁿ after Death.
Dr. Pingle's Dissections tend to confirm
the same Opinion. —

something of the Inflamⁿ? Diathesis
 - most of the putrid Diseases show
 us marks of Inflammation before &
 after Death. This may arise from
 Contagion acting as sedative & inducing
 Debility & as Stimulus? & thus inducing
 Inflammation. Some of them begin w:
 Inflamⁿ? Appearances, but from repeated
 paroxysms change into the nervous.
 Intermittents sometimes begin w: In-
 flamⁿ? Symptoms, but as ~~this~~ this
 Inflamⁿ? Diathesis goes off they become
 more regularly intermitting, all ~~of~~ ^{then}
 then of long Continuum are attended with
 more or less of the Inflamⁿ? Diathesis.



Intermitting Fevers are the Only ones where
no Inflammⁿ Diathesis appears. From this
then we derive a very general Division
of Fevers. may not Contin^l Fevers depend
on Debility alone? no - where Intermit^t
Fevers become Remitt^t or continual It is
owing to some Stimulus being applied. It
may perhaps in some cases form a Remitt^t
-ting Fever, but never can form a contin^l
one. It is then the Absence or Presence
of the Diathesis Phlogistica that gives us
the difference of Intermitting or continual
Fevers. It were to be wished we could
distinguish Intermittent & continual
Fevers from each other at their first

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Approach. The general marks of
 an Intermittent Fever are 1st an Epidemic
 Constitution of the Year 2nd from $\frac{1}{2}$
 greater Degree of Latitude 3rd from $\frac{1}{2}$
 longer Continuance of the cold with
~~the~~ 4th from a quantity of Bile being
 discharged during the Febr. This may
 depend upon the long Continuance of
 the Haem determining the Blood to
 the Viscera, more especially the Liver which
 promotes an increased Secretion of Bile
 which ^{we know} by vomiting. 5th from $\frac{1}{2}$ Degree
 of Remission which is always longer $\frac{2}{3}$
 in continual Fevers. This mark is always

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more certain when the Urine drops
a latitious sediment, as this shows
that the Gravel is taken off from the
Extremities: 6th from the Exacerbation
ⁱⁿ in Intermitt^{ts} & Fevers are always
attended wth more Horror than in Contin^{ua}
: also. we are more surely determined
that a Fever is Intermitt^{ts} when y^e
Exacerbation appears in the Morning
. But sh^d the Exacerbation happens at
any other time of the day it does not
follow y^e: It is not intermitting. Not
withstanding all these Marks Intermittents
may so far resemble continual Fevers
as to change their very nature incomm^u.

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that they require a very different treat-
ment as we shall say hereafter. Let

us now enquire into ^e circumstances in
which we give a Presumption of a Fever being

continual. These are ^{or} the Fevers

having ^{or} one from Causes of Inflamm.

namely whether Occasional or predis-

posing. the ~~latter~~ ^{former} Causes occur in

cold Climates & Seasons. the latter

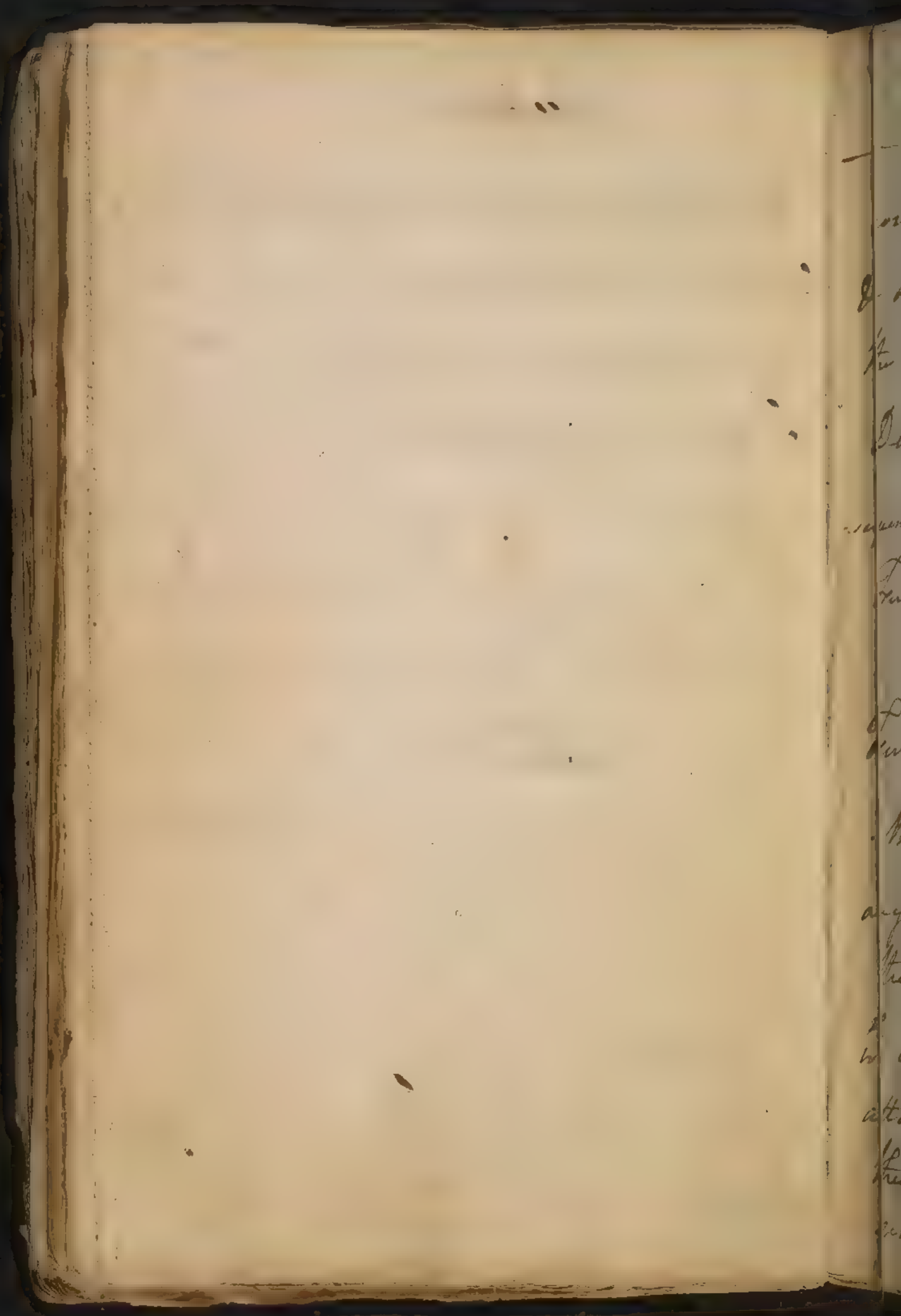
are stimuli of all kind. to these we

may add warm weather succeeding Cold

- Irritating - high seasoned Food &c

2nd the actual Symptoms of Inflammation

Diathesis such as a hard pulse. high



could not mine ^{the} without any Sediment
 & size Blood. none of these occur for
 the most part in Intermitents. These
 Distinctions will appear of great Con-
 sequence when we come to ^{the} cure of these
 Fevers.

I admit then of but two Genera of
 Fevers the Continual & Intermitting.

The Continual are such as are without
 any remarkable Remission.

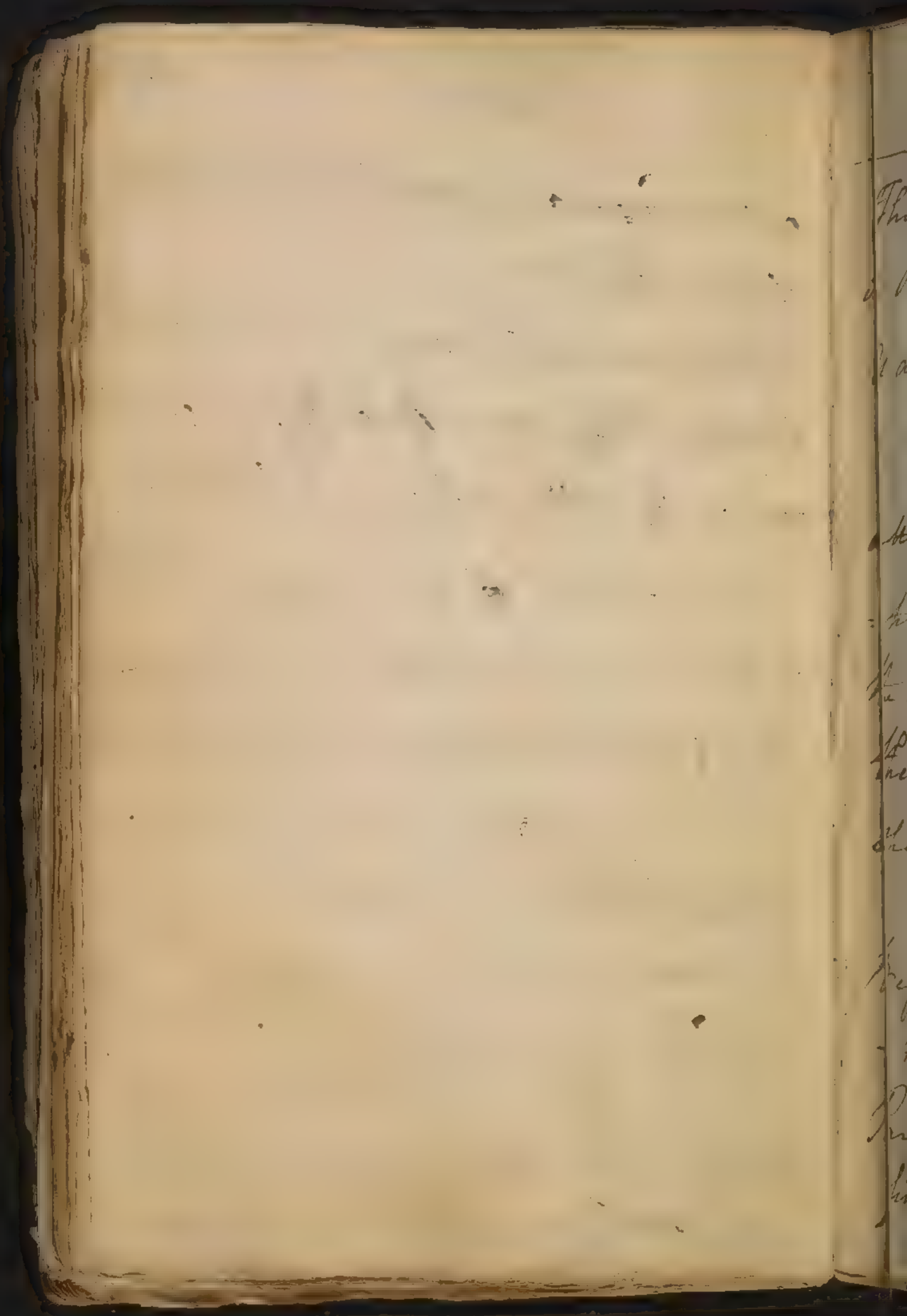
The Intermitt are such as are attended
^{the} with evident Remissions & have a Horror
 attending their exacerbations. The last of
 these marks I grant is not very absolute on
 universal.

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Let us now attend to the Division
of these Fevers.

The Continuals I said were attended wth
Diathesis Phlogistica. But they are greatly
varied by different Degrees of Debility.

Some of them are ushered in wth this
Debility - by great Sopor - Coma - vo-
miting - low weak & slow pulse. These are
what are called by English Physicians
Nervous Fevers. The slow pulse is not
essential to this Fever, nor yet ² mode-
rate Degree of heat w^{ch} Sanctus takes
in to the Character of this Fever. These
Marks apply however in general to
all ² Gravities of Typhus in Sanctus.

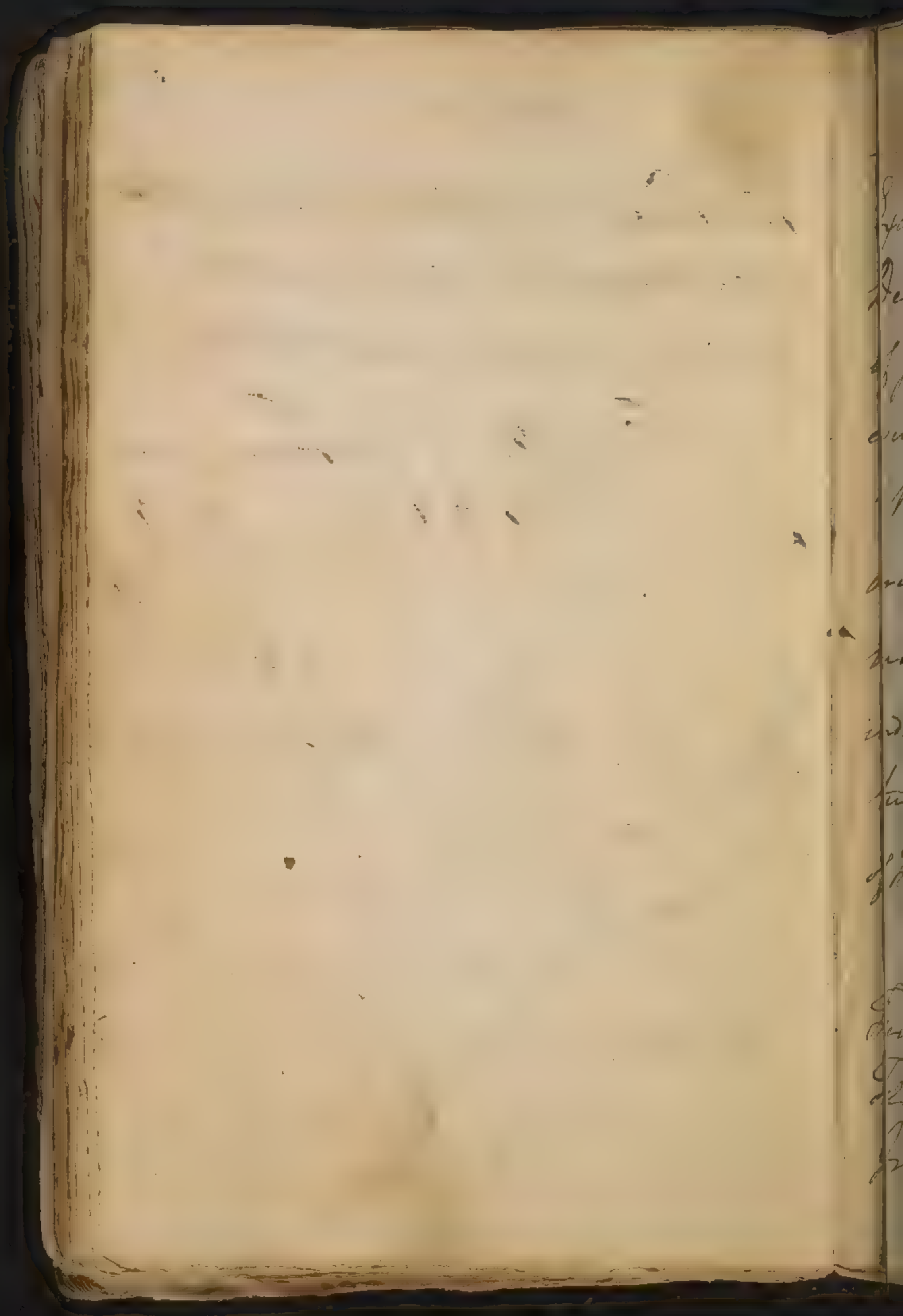


The Frequency of Pulse when very low
is Pathognomonic of the Nervous Fever
& always indicates great Debility.

The Inflammatory Fevers are
attended wth Debility - less affec-
tion of the Sensorium & more of
the Diathesis Phlogistica. to distinguish
these from the pure Phlegmasia I
shall call them Synocha.

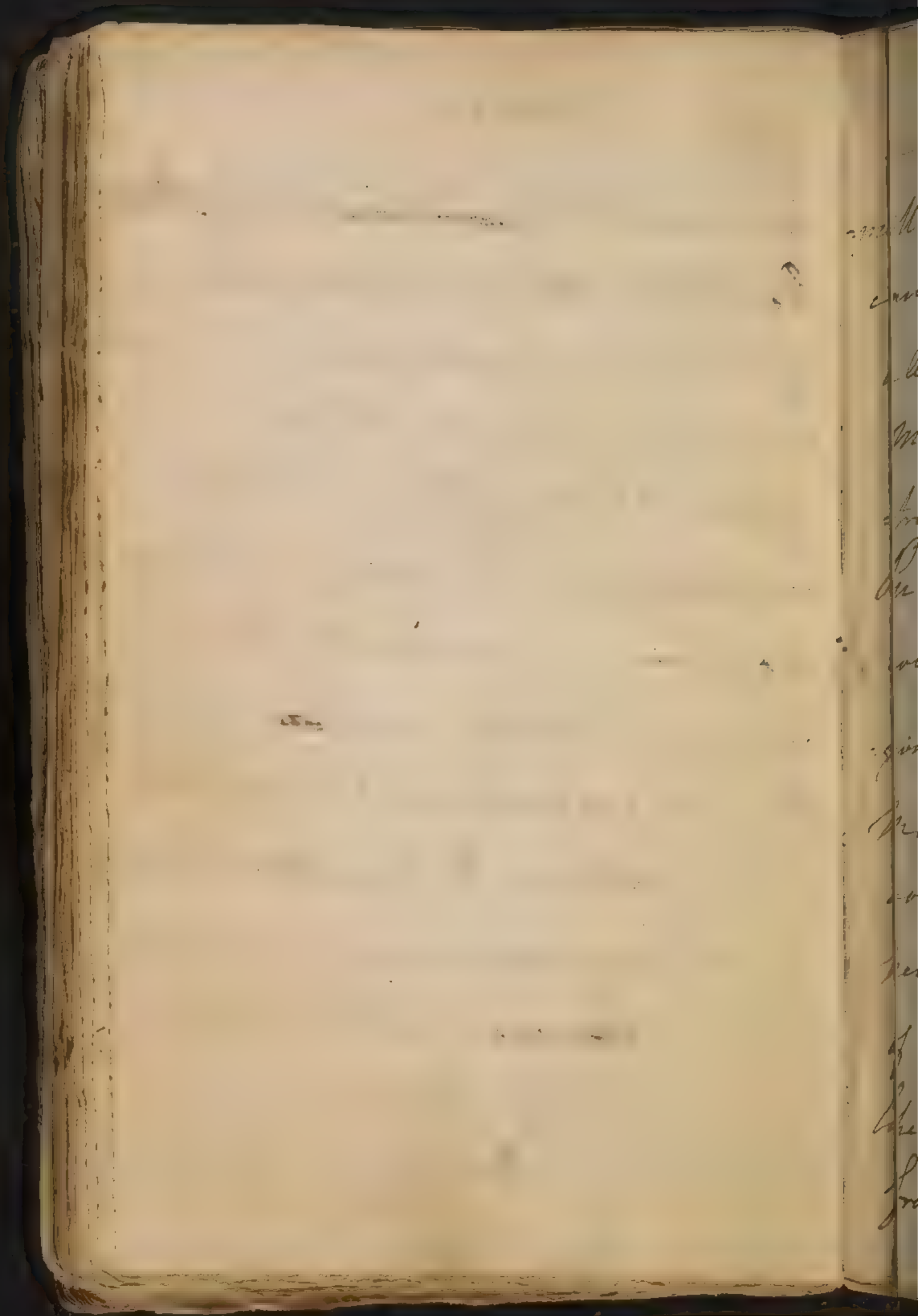
Some Fevers are Synochous in the
beginning & terminating in this kind.

- This depends upon the Repetitions of
Paroxysms wth increased Debility. we
find that every increased state of

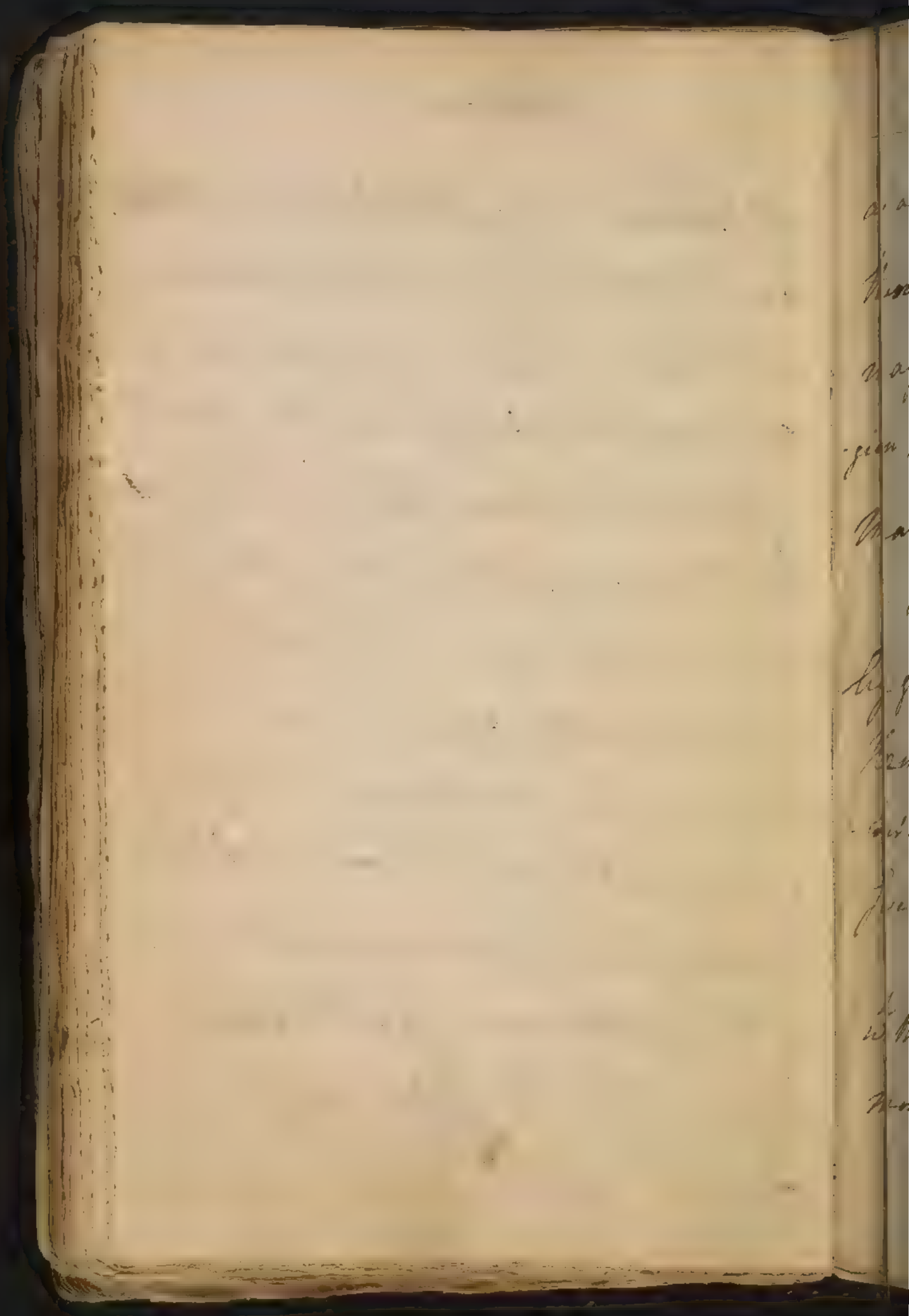


Excitement ~~not~~ brings on
Debility. This is evident in the case
of flesh w: succeeds Exercise or
every thing w: excites the sensorium.
- But topical Affections of ^{the} Brain
are produced in ^{the} progress of Fevers
may have a considerable share in
inducing Debility. we ~~had~~ want a
term to explain this intermediate state
of Fevers between the Synocha & Typhus.

What shall we say to putrid
Fevers? ~~they are~~ the tendency of our
Fluids to Putrefaction occurs in
Inflamatⁿ Remitting - & Inter-



with Fevers. no Distinction of them
 can be taken from Putrefaction.
 all Fevers from increased Heat-
 motion & Debility tend towards Pu-
 trefaction, but those Fevers ^{ex} are called
 Putrid may be distinguished from
 common Fevers. the putrid Conta-
 gion generally affects in such a
 manner as to appear most in
 continued Fevers, & those too of the
 nervous kind from the sedative power
 of the Contagion. Putrid Fevers
 likewise begin wth inflamma^{ry} symptoms
 from ^e Contagion acting primarily

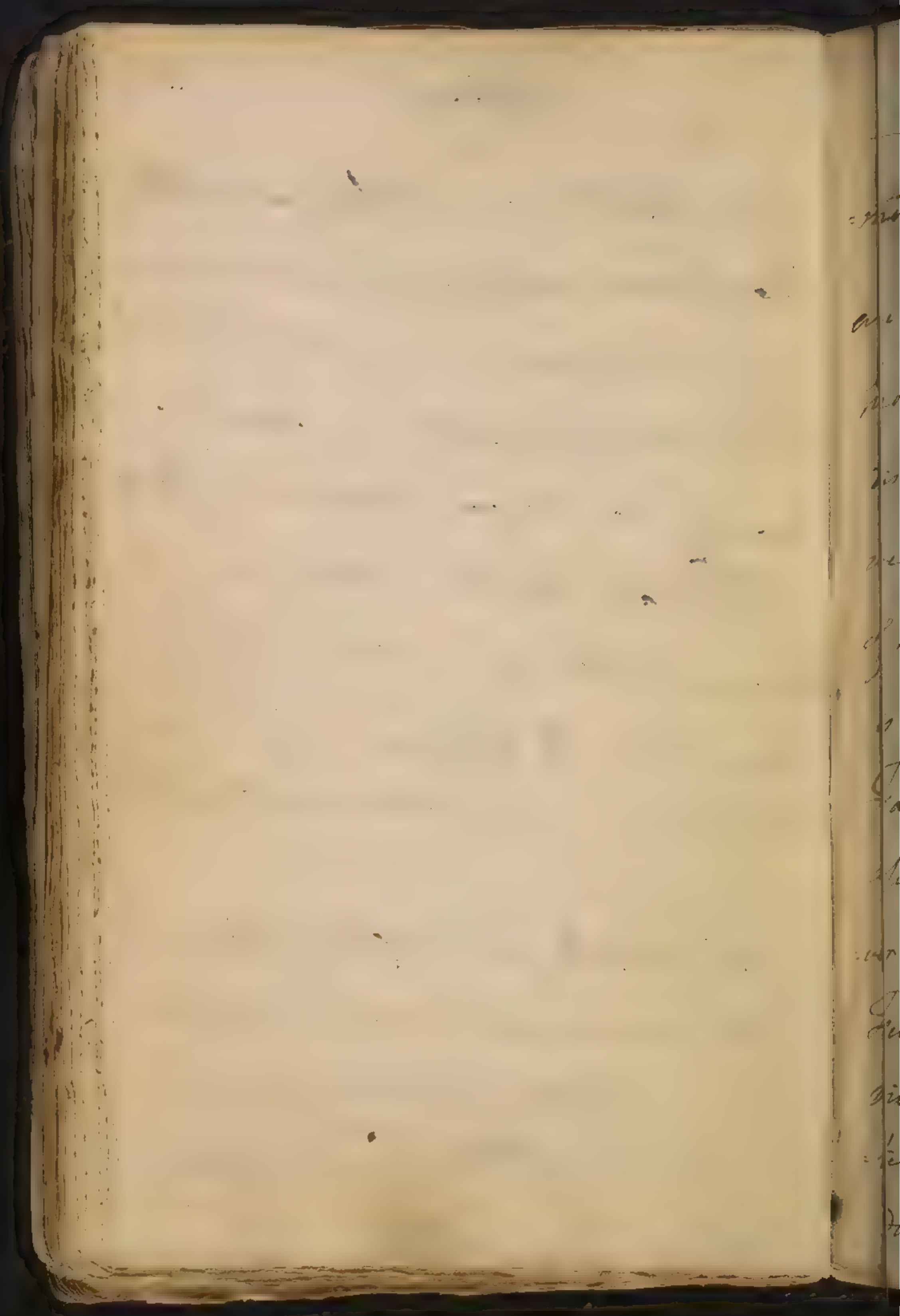


as a Stimulus. - After a while
these Fevers become nervous which
may arise from ² putrid Conta-
gion multiplying itself in such a
manner as to exert Sedative Effects.

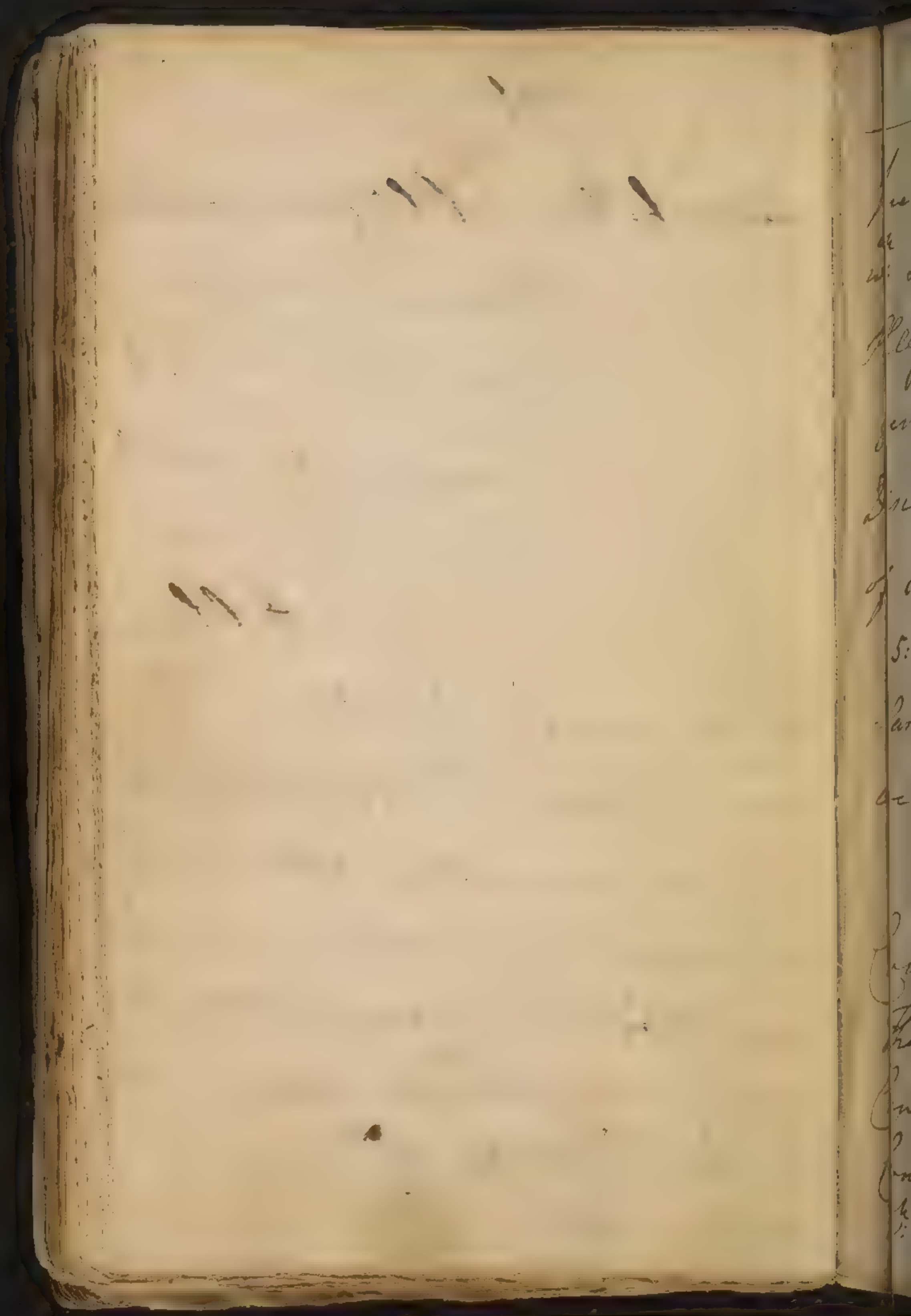
- They are further distinguished
by great Debility. dissolved Blood.
Hemorrhages Petechia - high. con-
sult'd Urine - loose stools & colligative
Sweats.

The Combination of the Inflam:
w: the nervous & putrid give the
most common Genus of Fevers.

We are often at a Loss to deter-



mine whether Phlegmasia or Fever
are primary Diseases. They often
produce & succeed each other. to
distinguish them from one another
we must ^{be} attend to ^{the} season
of the Year. in the Spring the Phlegmasia
is the primary Disorder. in the
Fall the Fever. 2.nd If the Phlegmasia
appears some Days after the Fever
comes on I would conclude the
Fever to be the primary Disease, &
vice versa if the Fever comes on af-
ter the Phlegmasia. 3. Fever is
distinguished from Phlegmasia by the



prevailing Symptoms of Debility
^{ch} w: seldom or never occur in the
 Phlegmasia. 1st the Phlegmasia is very
 generally known to be a primary
 Disease from the common Symptoms
 of Inflammation.

5th Fever is distinguished by regu:
 lar exacerbations ^{ch} w: seldom or never
 occur in Inflammatory Diseases.

There is another seeming
 Complication of Fever ^{ch} w: exanthemata.
 These are sometimes excited by
 Contagium & sometimes ~~by~~ are the
 consequence of Fever. the ~~Red~~ Patches
^{ch} w: are Effusions of Blood do not

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belong to this ~~dis~~ Order, but are
always Symptomatic & are generally
produced by Putrefaction. The small
pox & measles depend on Contagion
introduced, & therefore do not form
an instance of the complication we
are speaking of. There are ~~other~~
warm Disputes carried on between
De Haën & some other Physicians
in Vienna concerning this exanthema,
the Fever. The former supposed
that they depend on a warm Regimen
only. The latter assert that they depend
on Contagion in the same manner.

[illegible]

as ² small pox. I do not think
 that they are the Offspring of Fever
 alone as De Haen imagines. They
 are certainly of a contagious nature,
 notwithstanding they were never ob-
 served till the last Century for many
 Diseases have prevailed for many years
 without being described by Physicians. All
 I allow is that many Fevers by a swea-
 ting Regimen may terminate in a
 military Eruption. But this Eruption
 soon changes to an open pustulent
 appearance like the pure Eruption.
 This Observation I grant is
 liable to some Exceptions. all military

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Eruptions are accompanied th wth sweat:
ing. now we may suppose a pecu-
liar state of System & skin w^{ch} disposes to
miliary eruption. This is y^e Case in
Child Bearing women who always
in this country have a miliary
eruption when I have ~~been~~ con-
sidered no contagion of any kind prevail-
ed among them. There is an Order brei
Generis ^{ch} w^{ch} I cannot describe w^{ch} always
attends these miliary eruptions w^{ch}
are the consequence of Fever. a miliary
eruption attends many putrid con-
tagious Fevers, but as all are not
seized wth them, & as it does not

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break Out always at a precise
time, forming no military
Ferment was introduced but y^e the
eruption depends upon y^e great
Disposition w^{ch} these Fevers have to
sweat. In this manner therefore
would I compromise the Disputes at
Vienna. upon the whole I am most
inclined to embrace De Haen's Opinion
I dare not determine w^{ch} Fever depends
on Contagion. —

Having discussed these 3 Genera
of Fevers I shall now proceed to the
4th & last Genus viz: the Profluvia. I
cannot here comprehend Hemorrhages

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so universally. When a Fever occurs in Hemorrhages it is owing to something particular in certain Constitutions. I shall confine myself then to the Profluvia. I arrange ranks several of the ~~Profluvia~~ among the Fevers which do not belong to them properly. do Catarrhs belong to the Profluvia? I shall arrange them under this genus. The Catarrh is a Symptom in a Fever. It is produced by the same causes which produce Fever. They often depend upon Matter introduced into the body as in the Measles & Other Exanthematus Fevers. These kind of Catarrhs are to

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increased remarkably at each of
 these Periods. Is there any Idiopa-
 thic Heat Fever? not connected
 with topical Affection? no. It always
 arises from some topical Disease, &
 is never Idiopathic. Sometimes it
 is difficult to distinguish & point out
 the topical Affection, nor can we al-
 ways tell how it excites a Fever when
 we do perceive it, but from Anal-
 ogy we may conclude the Heat Fever
 always to be occasioned by ~~the~~ ^{it} upon
 the whole then I conclude y: the
 Heat Fever ought not to be a separate

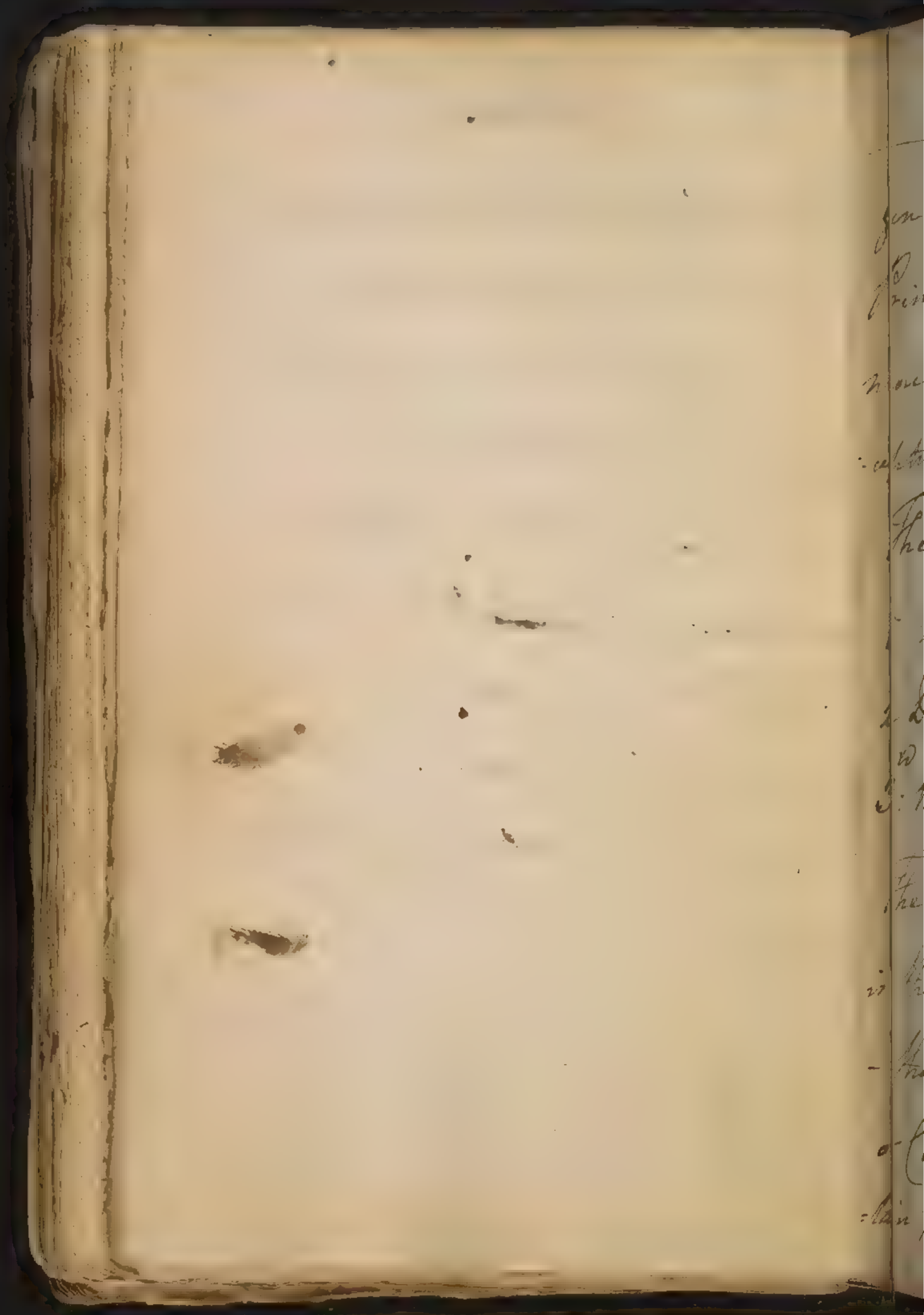
[Faint handwritten notes, possibly bleed-through from the reverse side.]

Genus of Fever. It generally depends
 upon an inflammatory Congestion
 especially when it arises from a
 Suppuration in the Lungs. Matter
 is likewise absorbed from Ulcers w:
 we know irritating & weakens the
 system. & from hence arise $\frac{1}{2}$ of
 action & profuse sweats.

This finishes all I had to say concern-
 ing the General Division of Fevers.

I come now to treat of $\frac{1}{2}$ remote
 Causes of Fevers. Remote Causes

The proximate causes of Fever we
 have said are Debility & Congestion.



generally speaking. for there is no Principle in any Science much more Physics, but is liable to 4. variations.

The chief causes of ~~the~~ Fevers are

1. Extraneous Bodies introduced.

2. Debilitat. passions of the mind.

3. the action of Cold.

The Introduction of foreign Matter is the most general Cause of Fever.

- These Matters are either Miasmata or Contagion. The Miasmata are certain particles arising from morbid bodies

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of men. Contagion arises from
the bodies of men likewise & reproduces
itself. I shall first speak of
1st Origin of Miasmata 2nd ^{only} speak of
their Diversity & 3rd treat of their
Operation in conjunction with other
causes in producing Fevers.

1st Origin. . . Miasmata are owing
to heat & abound most in warm
seasons & warm climates. They are
mostly destroyed by cold. The Rague
always ceases to rage in cold countries
upon the approach of winter. even
the Catarrhus Synovialis is checked by cold.

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I conclude therefore that miasmata
are produced by Heat & arey ^{the} offspring
of Fermentation. They are not al-
ways of a putrid nature as some
suppose. The small pox depends upon
a Ferment but is not a putrid Dis-
ease notwithstanding. The most pow-
erful miasmata are generated ~~for~~ in
animal bodies. Mephitis Air we
now exhales constantly from Animals
that breathe. perhaps too Mephitis
Air exhales in Perspiration. now
this Mephitis Air is highly Sedative,

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It takes off γ excited state of the
 Insorium, at Once. a Diffusion of
 this Mephitic Air in γ Atmosphere
 tends to destroy its virulence. But
 if ~~it~~ it is long retained in γ Cloaths &
 accumulated it acquires a peculiar
 virulence & becomes capable of affec-
 ting Animal Bodies. The Histories
 of Jail of Hospital Fevers tend to illus-
 trate & confirm this Doctrine. Fevers
 will be greatly varied by γ different
 Men from whence γ Miasmata come.
 by the Season of the Year by γ Climate
 & by several other circumstances of γ
 Nature.

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These Miasmata multiply them-
selves in the human Body, & produce
a Contagion capable of producing
the same Disease again. When they
become Contagion they acquire a
particular power, of affecting those
whom the Miasmata did not. But
there is another source of Miasmata
arising from all other Animal Sub-
stances. They are ^{not} always the offspring
of Putrefaction. or the Anatomists w?
be most subject to putrid Fevers who
are so much conversant^d with putrid
Animal Bodies. nor do Excrements pro-

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pure putrid Fevers or ^{the} Inhabitants
of Dunburgh w^d? soon be carried off
by them. I do not think w^d ^{the} Dr Pringle
that the human Faces have Anti-
reptic powers. There is then a certain
stage only in putrefying Animal substan-
ces in w^h they can produce putrid Fevers.
Upon the whole we know of no
Exhalations but from Marshy
Ground that produces Fever. w^h is
the nature of these Exhalations?
The sea & Lakes send forth no morbid
Exhalations. The Inhabitants of
Egypt are never subject to the

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Plague but after the Receipt of
the Mite. How do these Exhalations
operate? I have sometimes thought
merely by the Cold generated by Eva-
poration, but if this was of Lake
& Fens w^d produce ~~as~~ Fevers as well as
Miasmatic Ground. It appears rather
to be owing to the semiliquid state of
the Fluid retaining Miasmata in such
a manner as to suffer them to be
raised by Heat. Water seems rather to
destroy them. we know but little of
the Nature of these Miasmata. Lancisi
says they are Organised & Inorganised

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many have attributed a great share
to the Organised Miasmata in producing
Fever. But this is merely Hypothe-
tical. Putrefaction we grant generates
Animalcules. but Heat & Moisture
may produce morbid vapours and
Animalcules at the same time,
tho' the latter having any share in
producing Fever. Besides we cannot
suppose these Animalcules can mul-
tiply themselves in $\frac{1}{4}$ human Body
unless we suppose the same process to
go on in the Body as first produced
them. I conclude then all Miasmata

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are more organized
 2. Let us now enquire into ^{the} diversity
 of Miasmata. There is a foundation
 for dividing them into species. we
 see them operate uniformly on
 all Constitutions in all Ages & in all
 climates in the same way. I do not
 think the Diversity of Contagions so
 great as Dr. Sydenham supposes. The
 various Miasmatic Fevers show us ^{that} they
 are very much limited. ~~all~~ all
 our acquaintance with Diseases in all
 parts of ^{the} world has yet found out
 but so different ~~the~~ Genera of Contagion breeding

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to Laurye. But even this Compu-
tation is too extensive. I think they
may be reduced to 3 or 4. But even
supposing they 'dout exceed 10 Genera
they are very much limited. many
of them supposed to be different Genera are
varied rather in Degree than kind from
the Ferment, th arise from Anim: Bodies
being retained longer or shorter in the
Bodies it exhaled from, or from Circum:
stances of a like nature. by w: means
of ~~more~~ Ferments are more or less
exalted to use ^{the} Language of our Schools.
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independent of the different Degrees
of Virulence in the Contagion.

these Circumstances are ^{or} the
Constitution of the Patient. This
is most evident in the Small pox. we
often see the same matter produce very
different pox in different Constitutions.
The nature of Epidemics shows
likewise how much ^e Diversity of
Contagions depends on ^e Difference of
Constitutions. Some of these Epidemics
we see affect children only, some
men & women. while Others affect
Persons of a particular Country only.

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2nd The state of the air varies the
 Operation of Miasmata. warm
 air destroys the Contagion of $\frac{c}{y}$ Mias:
 also in some measure. a cold
 air destroys the Miasmata^{ch}: produce
 the yellow Fever. Dr. Sydenham has
 pointed out how much Epidemics
 are influenced by the different sensi:
 ble Qualities of the Air. He indeed
 attributes it to a specific Difference in the
 Contagion but I think all y variety
 of his Epidemics may depend upon
 $\frac{c}{y}$ Causes we have been treating of.

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Dr. Boerhaave Dr. Boerhaave Dr. Boerhaave
& Celsus Aurelianus who wrote
in different Ages all agree in descri-
bing the Febrile Fever as y^e same
Disease & varying in y^e same manner
by Changes in the Air & y^e other Circum-
stances we have spoke off. in the
same manner the Bilious Fever
appears to be y^e same Disease in
all Ages & Climates. This I prove
by its always being produced by y^e same
Cause viz: Exhalations from Animal
Bodies or Marshy Ground. Books are
apt to mislead us in their Histories of

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Epidemics. It is but within these
100 years that Authors have written
with any Precision or Accuracy on
this Subject & the more precise &
accurate they are the more we are
convinced of the restricted Number of
the Genera & Species of Fevers.

3.^o We come now to enquire into
the Operation of Contagion.

This Operation is very limited.
They don't affect Persons universally.
nor Families nor Cities. This
may be owing to several Causes such
as 1.^o Contagion is not always applied

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to every body or at least in ~~an~~ too
weak a state. It is necessary for
them should be concentrated before
they can produce their Effects. In this
it bears a strong Relation to Mephi-
tic Air & Exhalations in general.
th always act in proportion to their
Degree of Concentration. we have
many proofs of this being the Case. The
Plague is not communicated to an ad-
joining House unless there is some Inter-
course by Furniture or Cloths or some-
thing of a like nature. Dr. Lind's Treatise
on Fevers & Infection ~~is~~ is full of Facts

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of this kind. the Contagion must adhere to something in order to concentrate it sufficiently to be propaga-

ted. Physicians seldom convey Contagion merely because they stay too

short a time in their Patients Chambers to carry away any Degree of

particles with them. all this tends to show the Reason why so many

escape Contagious Diseases while they are prevailing. But another Reason must be assigned why Persons escape

Contagious who are exposed to it.

Other powers must concur to give

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the Contagion in its full force. W:
are these powers? the Passions of
Grief & Fear are the chief. hence
all Epidemics affect more Peo:
ple in their Beginning than after
they have continued for some time
upon y^e Acc^t: of Mankind being
more used to the Terror of them. we
see too how Persons most subject to
Epidemics who are most afraid of y:
- both these Passions act by inducing
Debility. Another power to be called
in is the action of Cold. Dr Lind's Book
is full of proofs of this. Does y^e Cold

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act by inducing Debility or a Spasm?

I shall show hereafter perhaps in both ways. Every thing else that tends to bring on Debility such as Purging - Involation - Exercise -

Caputis &c tends to favour the Operation of Contagion. in all Epidemics the Concurrence of these

Exciting Causes is necessary to promote the Operation of Contagion, & this is the

Reason why so many people escape contagious Diseases. Some Contagions

I grant act independant of these exciting Causes, such as Small pox.

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In some Cases too it is difficult to tell when the Concurrence of exciting Causes is necessary. It will often depend upon the virulence of the Contagion & the Vigour of the System to w^{ch} they are applied. It will be greatly influenced likewise by Contagions affecting the Blood. When Contagions act as Ferments they require the Concurrence of no exciting Causes. Hence the universal power of Exanthematic Contagions w^{ch} act as Ferments upon the Blood. Ferments w^{ch} have a less assimilating power require the Assistance of the exciting Causes. Even those Contagions w^{ch} act universally

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Ferments may in some Cases require exciting Causes especially when they are not sufficiently concentrated.

3.rd Contagions are still further restricted by the Bodies being in certain Conditions capable of resisting their Operation. These Conditions occur in certain Ages - Sexes & Temperaments. History of Epidemics is full of proofs of this fact. The yellow Fever affects none but Foreigners. the negroes Dysentery says are never subject to it. They must therefore have something in their Constitution which resists the Operation of Contagion. Some Persons too are more disposed

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to particular Diseases than Others.
Thus the Inhabitants of $\frac{2}{3}$ West Indies
are often seized w: the Diseases of their
Climate even here in Britain.

How does the Body resist the Opera-
tion of Contagion? It may depend
1st upon a Vigour of System w: qualifit
to resist all the Causes of debility.
2^d Upon a certain state of the Fluids & p
fitted for certain Excretations.

One Reason why Foreigners are more
subject to $\frac{2}{3}$ yellow Fever than $\frac{2}{3}$ natives
may be owing to their Fluids not being
so far advanced towards Putrefaction as
the Fluids of those who have long been
exposed to the excessive Heat of $\frac{2}{3}$ sun.

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It may depend upon ^{the} power of
habit. all Impressions have their force
weakened by Repetition. If men have
a certain rigour of System & escape the
exciting Causes they become so habit-
uated to the Contagion that it requires
a powerful Quantity of it to affect
them. It is from this, that Physicians
& Nurses are seldom affected wth conta-
gious Diseases. May not the Reason why
People are seized wth Contagions but once
in their Lives be owing to ^{the} Force of Habit,
or to their nervous System being once
affected wth by Contagion? But to this we
must add ^{the} Fluids are capable of fermentation: but
once.

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1^o It may depend upon Persons being exposed to Odors of a particular nature w^{ch} prevent the action of Contagion. We have many facts w^{ch} tend to confirm this Conjecture. The Influenza w^{ch} prevailed so universally in y^e Year 1734 never affected the People confined in the Goals of D^{ist}, w^{ch} I believe was owing to their being surrounded wth Odors of a peculiar nature.

Let us now speak of y^e 2^d Other Causes of Fever. Viz Fear & Cold
Fear. This act powerfully in inducing Debility. It sometimes produces Fever

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of a permanent nature.

Cold. You all know ^{the} modus Operandi of this cause. I shall only enquire whether Cold is a frequent or only cause of Fever? From the Phenomena of Cold Bathing it appears probable. But its Effects here are very transitory unless ^{the} crisis & surprise concur w: it. I believe it seldom produces a permanent Fever alone.

For ^{or} in most Cases where we are aware of its Operation we see nothing but Catarrh & Rheumatism & never a proper Fever. Even in those Cases where ^{the} Cold is suspected of acting

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alone. Other Causes may have cooperated
such as Miasmatic Contagion for we
often see Contagions adhere very long
to certain Bodies, & yet excite no Effects
upon the persons who have carried
them about th them. but if they have
been transferred to Other Persons or
to Other Countries. Contagions are
very tenacious in ^e same manner as
Odors th we know continue on Bodies
for a 100 Years. Now as this is ^e Case
the Effluvia of Animal Bodies may be
accumulated in the Cloaths in such
a Degree as to act at Once when the
exciting Causes we spoke of occur

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more especially cold. But further all
countries have marshy exhalations
at all seasons of the Year w^{ch} may pro:
duce an Impregnation of the Air to such
a Degree as to produce ~~fever~~ Fevers
w^{ch} we attributed to ^{the} existing
causes alone. I conclude then that
Heat & Cold never or very seldom
produce Fever alone without some ex:
isting Cause joined wth them.

Are there no Other Remote Causes
of Fever? - If ^{re} they are they act only
by inducing Debility. They are never
strong en^{ough} to excite Fever wthout the
Concurrence of Cold or Other Causes.

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But there are Other Remote Causes
of Fever w^h deserve to be considered
viz: the various Affections of
the Stomach. the whole System
is affected by the different States of
this viscus. It has a powerful Connec-
tion wth the Extremities of the Arterial
System where we know ^e proximate
Cause of Fever is seated. we see in many
Cases a certain State of ^e stomach
bring on Spasm & Pyrexia from Congestion.
But it never brings on the phlogistic
Diathesis, but rather Debility. hence
we see it most generally brings on

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Intermitt & Fever. This is a very
difficult Question It is some Blemish
upon our Doctrine of Remission. I
consider it however as a Remote
Cause of Fever. Crapulas Indigestions
& particular Foods all bring on Fever
but whether they all act in One way
or have something peculiar in their Opera-
tion I cannot pretend to determine. —

~~Before I proceed any farther I shall~~

Let us now speak a little con-
cerning the different Species of Fevers, &
this we shall do by treating of the
Nature of Epidemics. —

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Epidemics depend upon some matter
in Diet or the Air applied to a great
number of People at Once. Thus the
Leucorrhoea depends upon Diet, ^{is} is a kind
of Epidemic but must not be conside-
red here as it does not belong to ^{the} fevers.

I shall likewise exclude all fevers produ-
ced by Diet, as they are properly all of
them Symptomatic.

I shall speak only of Epidemics
arising from the Air. They may
be produced either 1^o By ^{the} sensible
Qualities of the Air, or 2^o By ^{the} insensible
Qualities of the Air. D. Winttingham

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attributes all Epidemics to ^{the} first
Cause. Dr Sydenham imputes them all
to the last Cause. Dr Boerhaave too
I think leans to Sydenham's Opinion.

The sensible Qualities of ^{the} Air mo-
dify the Epidemics arising from ^{the} last
Cause. the sensible Qualities of ^{the} Air
give we shall speak of are Heat & Cold
Moisture & Dryness. Heat & Cold
have the chief & almost only Effects.
Moisture & Dryness act by modifying the
Heat & Cold by determining their Influence
& varying their Operation. Heat produ-
ces the Diseases of Summer & Cold ^{the} Diseases
of winter. Heat joined w: Moisture

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produces putrid Diseases. Moisture join-
ed wth Cold increases its Effects by the
Evaporation induced as Chemistry tea-
ches us. Cold by increasing the Tension
of the Solids, gives Occasion to $\frac{2}{3}$ Phlogis-
tic Diathesis, & hence Inflammⁿ: & Dina-
mies are generally produced by Cold, &
prevail in the winter & Spring. Heat
by relaxing the Arterial System takes
off the Inflammⁿ: Diathesis, & increases
a putrid Tendency altho' it may not
of itself be able to produce a putrid Fever
wthout the Concurrence of Miasmata or
Contagion. By increasing Perspiration
it makes $\frac{2}{3}$ Humors Acid w^{ch} may

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dispose them to putrid Fermentations,
or to be affected by their own Miasmata.

From Warmth applied long^y Body
the Bile is apt to become acid, &
to overflow in the Intestines, hence the

Reason why Cholerae are so frequent in
the Dog-days. It is ^e/_y Bile itself chan-

ged on is its Acrimony occasioned by
Perspiration being affused to it? I
shall not here determine this Question.

This Afflux of Bile into ^e/_y Intestines
should not always to be considered as
Cause of autumnal Diseases; from w^h
we said before of Intermitting Fevers
it may be considered rather as an Effect than

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a Cause of Diseases. Heat suddenly
winning on stimulates the System &
thus brings on $\frac{e}{s}$ Inflammⁿ: Diath^s.
is. hence the Reason why Intermitt^s
are changed into continu^s fevers upon
the Approach of Summer. From all this
you see the Reason why Inflammⁿ:
Diseases prevail in winter & spring
& putrid & Bilious in $\frac{e}{s}$ summer &
Autumn. Heat favours $\frac{e}{s}$ Rise &
propagation of Contagion. Cold tends
to destroy it, & renders our Solids
less apt to ferment wth Contagion - for
a further Ac^t: of the sensible Qualities
of the Air I would recommend to you

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In wintering has Epidemics but be
careful to avoid embracing such notions
from him as will lead you to reject the
history of Miasmata producing Epidemics.

I go on to speak of $\frac{2}{7}$ insensible
qualities of the Air or of Miasmata.
these are more important than those
we have been speaking of. I suppose
a much greater part of mankind.

Diseases depending on Miasmata are
universally contagious notwithstanding
disputes that have been maintained
to the contrary.

There are certain Specific Contagions ^{which}
are endemic in some places of $\frac{2}{7}$ world.

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from whence they may be propagated;

But we are uncertain of their true nature & Origin. The small pox measles & a few others ^{are} of this nature.

They are of a stimulating & sedative nature, & are disposed to unite wth

other Contagions. The Plague is a

specific Contagion. This I prove from its being always endemic in some

places. It has never reached America

nor the East Indies. It is always

peculiar to the Turkish Dominions.

It is not produced by the Customs of the ~~East~~ East Turks, as some have sup^{posed}.

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known for in many parts of Turkey
it never has been known. There
are many Diseases w^{ch} resemble the Plague
in having Buboes - Anthrax & Carbuncles.
From w^{ch} we may suppose that
the Plague is only a diversified species of
the putrid Diseases.

There are few other Specific Contagious
Diseases except these. The Yellow Fever
however is another species.
It is certainly a contagious Disease & its
Symptoms are ~~to~~ widely different from
the Bilious Fever. All the other varieties
of Epidemics are to be reduced to two.

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Species only. such as are propagated
by Contagion evident to our Investigation
~~to taste~~ or from Fomes, or 2nd: such as
depend on ^e sensible Qualities of the
Air.

~~add~~ we shall first treat of those
Epidemics w: arise from human &
marshy Effluvia. I would restrict
the Effluvia w: produce Diseases among
men to ^e human species only as
Brutes are never affected at ^e same
time w: it, nor are mankind affe:
ted w: the Epidemic Diseases of
Other Animals. we have Instances at
Marseilles of Dogs licking the sores

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of Persons affected wth ² Plague wout
receiving it from them.

Both these Effluvia from human
bodies & marshy Ground have
3 Effects upon ² Body 1 sedative
^{no} 2 stimulating & 3 septic. by the 1st
they act on ² nervous system. by the
^{no} 2nd on the sanguiferous & by ² 3rd on the
fluids. the human Miasmata ^{are}
more directly sedative & have sti-
mulating power joined wth them ^{ch} makes them
produce a continual Fever. ^{then} the septic
powers are less evident. the Marshy
Miasma is less stimulating & hence

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it generally produces Intermit^t.
 Fevers. the human Miasma gives
 the Nervous Fever w^h in its Beginning
 may be inflamm^{at}. the Marshy
 Miasma is less sedative, or it proves
^{so} only by its Septic power or by
 multiplying itself in the body. the
 Septic power is sometimes combined
 wth $\frac{1}{2}$ Stimulat^g. & thus changes Inter-
 mitting into continued Fevers. the Sail
 Fever comes from human Miasmata
 - the Yellow Fever arises from Marshy
 Miasmata, & hence its putrid Disposition.
 - the Camp Fever comes from $\frac{1}{2}$ human
 - the Marsh Fever from $\frac{1}{2}$ Marshy Mias.

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mata I acknowledge notwithstanding ^{q. 2} y:
it is very difficult to distinguish these
Diseases from their sources. in their
fundamental Qualities they resemble
~~the~~ One another, & according to Dr.
Piringle may be combined toge:
ther. See p: 296 of the 4th Edition of his book.

You will easily see from this how
much Epidemics may be varied by ^{q. 2} y:
different Degrees of Sedative & Stimulat:
Septic Qualities ^{ch} w: Miasmata proper,
or by different Miasmata being combined
together. Miasmata are further varied
by the sensible Qualities of the Air, or

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by the peculiar Constitutions of
Men. Some favouring the Sedative

Others the Stimulating & Others Against
the septic power of Miasmata. These

Notions may appear Theoretical,
but they are founded on Facts, & will

lead us to arrange Diseases in a
regular Porology as we shall see

more fully in the Cure of these Diseases.

I would not however push these prin-

ciples wth too much Rigour. There are One

or two Contagious w^{ch} are of a Specific na-

ture & are not reducible to any of these

Heads. the 1st is the catarrhal Contagion.

- it is disposed to associate wth those

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Fluid^{ch} is: furnish the mucus of the
Pne. Bronch^{ch} & Larynx. it generally
irritates & inflames the mucous Mem.
brane of these parts & produces Angina
Catarrh^{ch} & Cough. all Europe seems
sensible of such Contagious from y:
Frequency of Influenza of late among
mankind. I have seen 4 of them my-
self. Lawson calls it Synocha Catarr-
halis, but has overlooked many exam-
ples of it. It has at all times been con-
tagious. it occurred in y^d 1510. & several
times in the two succeeding Centuries, & is
described by Hoffman Wintretham J. Hurham
& some Others. There is no disease

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affects so universally. the Miasmata
 seem to be diffused in the air, & propagate
 the disease ^{almost} without Contact, but
 not so rapidly or at such a distance as
 some suppose. It generally appears
 in the winter season, & has a good deal
 of the Inflamⁿ: Diathesis joined wth it.
 - an Obstruction of Perspiration is necessary
 to bring on the Disease. It sometimes
 prevails wthout bringing on Inflamⁿ:
 on y^e mucous glands. in those cases it
 produces miliary Effluences. in y^e:
 summer it appears in this manner
 It depends upon the warmth keeping
 up the Determination to the skin. may

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not all military Infections be the
 Catarrh differently modified by $\frac{2}{y}$ heat
 of summer? w: seems to favour of
 this supposition is y: most military
 Fevers are attended w: Catarrhal
 Symptoms. In all cases where a whole
 Family is seized at Once w: ^{the} cold word
 in the air,
 the concurrence of Cold & Moisture always
 suspect the Operation of Contagion.
 There appears to be a catarrhal Con-
 tagion always lurking about us. It is
 now a well established Fact that the
 Inhabitants of S. Pilda are all seized
 w: a Catarrh in a few days After a
 Stranger lands among them.

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There is another specific Contagion
of this Genus to be spoken of viz: the
Dysenteric Contagion. I believe it
always arises from marshy Effluvia
but may require a certain Concur-
rence of a particular state of Bile
or of the Mucous of the Intestines
to produce it. we have ² most
undoubted proofs of its depending upon
marshy Miasmata from Dr. Pringle &
Dr. Coghorn. It generally coincides
wth the tertian Fever, or occurs at y^e same
season wth it. of these have a striking
Example in Coghorn's Treatise of the
Diseases of Minorea. from this

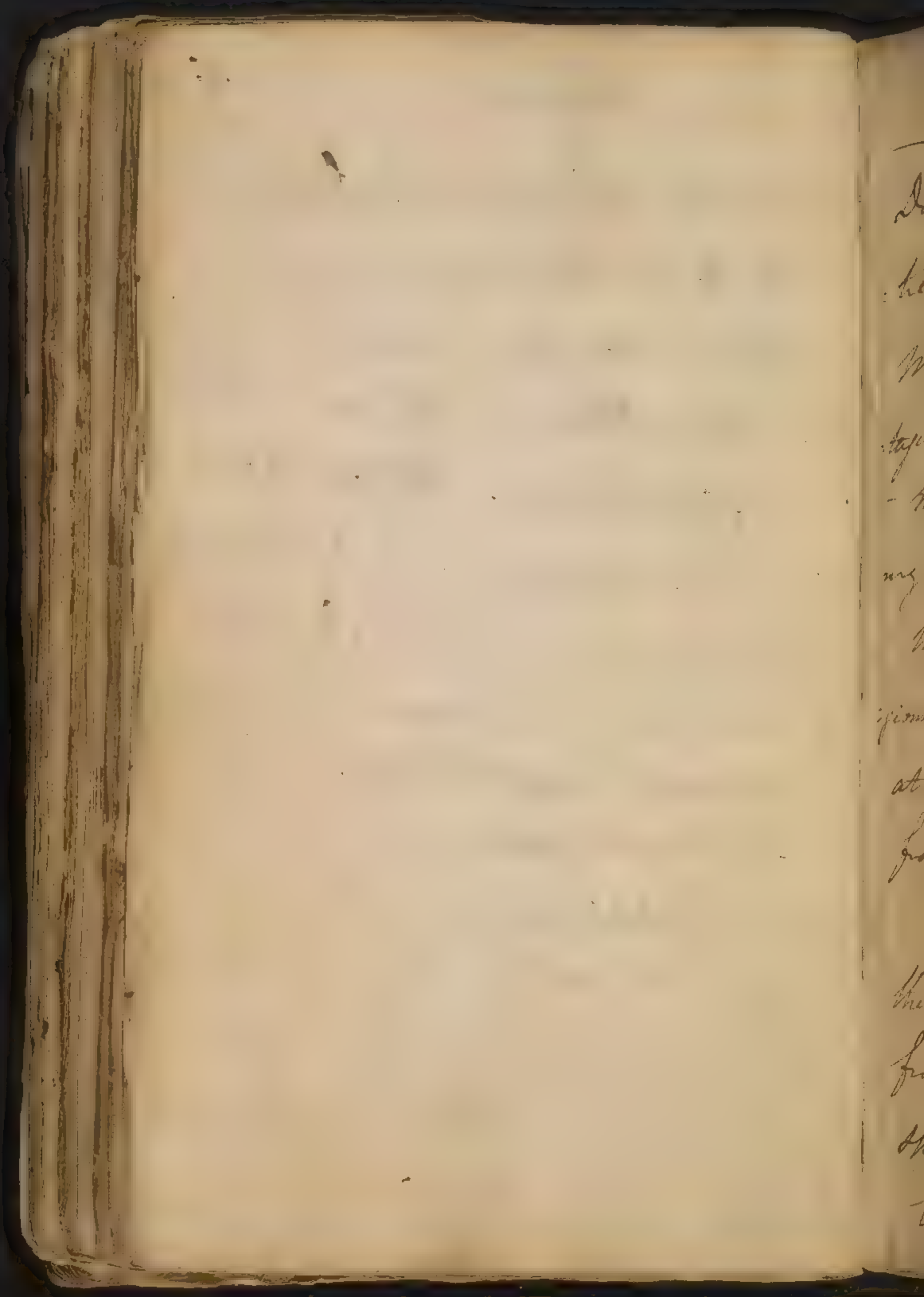
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I am induced to believe that both
Diseases depend upon one common
Origin or upon the same Miasmata
we find they resembled & were changed
into each other, & were in a like
manner both cured by $\frac{1}{2}$ Bark.
Dr Pringle has some Observations
in S. 3. Ch. 6 part 3. w^{ch} tend to confirm
his Opinion, Altho' he seems unwill-
ing to draw the same Conclusion from
them. a late Professor at Göttingen
in a Treatise de 'Morbo Mucoso' w^{ch} is
nothing but a Dysentery has likewise
fully proved y^t the Ferition & Dysentery
depend upon $\frac{1}{2}$ same Miasmata.

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In this view therefore the Dysentery
is not to be considered as a specific
Contagion, nor does it subsist at all
times like other Contagions, but is
annually produced. This Contagion
when it is turned into a Dysenteric
nature however produces Dysenteries
only from having undergone some change
in the body, & not Tertians. This finishes
what all I had to say upon Epidemic Con-
tagion. I shall briefly recapitulate
all ^{of} that has been said on this subject.

The Diseases produced by ^{the} venereal
Qualities of the Air are very few. Pleuritis
Pneumonias &c are almost $\frac{1}{4}$ only -



Diseases produced by γ sensible qualities of the air.

Most of Epidemics depend upon contagious ^{ch} w: are Exanthematic & Catarrhal. - there may be others ^{ch} w: have escaped my Reading & Observation.

Many Epidemics depend upon contagious ^{ch} w: are Occasional, ^{ch} w: may be produced at all times & in all places. They arise from γ human body & marshy ground.

Epidemics may arise from either of these, or from both combined together, or from either of them or both uniting th w: specific Contagions.

Epidemics will be varied by the

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sensible Qualities of the Air & by the different States of ^{the} Constitutions of Men. all the Modifications of ~~the~~ Miasmata & Contagion may be reduced to Lixative. Stimulating & Septic powers, & all Epidemics will be varied by the greater or lesser predominance of one of these.

There is a curious Problem started of late Years concerning Epidemics. i.e. that they were much more frequent in ~~some~~ former Years than ^{at} present. Edm. Ham & Morton abound ⁱⁿ the Descriptions of Epidemics. Reivie wonders where they got them from. the Reasons of this

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owing ^{to} fewer human miasmata
being generated ~~to~~ at present than
formerly from people's living life
crowded together. 2nd to our cities being
kept much cleaner than formerly espe-
cially in England. 3rd People are less
confined to their houses than formerly
the paving of streets & use of carri-
ages have invited people more abroad
of late years. 4th the great change in
our diet makes our bodies less apt to
generate or to receive miasmata. 5th
vegetables are now purchased so cheaply
that poor as well as rich in some coun-
tries live on them at present. 5th the

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use of sugar has likewise tended to
diminish the Effects of human Mi-
seria as well as to prevent their Gene-
ration 6th Greater Attention is paid
to our Goals & Hospitals than former-
ly from whence we know so many
Contagions to be their Rise 7th The
Improvements ~~of~~ in Agriculture
have tended to diminish the Quantity
of marshy ground. a very fruitful source
of Miasmata! 8th We are less exposed
to occasional Causes ~~of~~ than our Fore-
fathers from $\frac{1}{2}$ greater Compactness of
our Houses. & greater plenty of Fuel among
us. I tho't it of Importance to point

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but these things, that we may in w:
manner to proceed in checking y:
Rage of Epidemic Diseases.

Let us now consider the periodical
motions of Fevers. This a subject of
importance than it was formerly
from our depending life upon the
Operations of Nature. But still it
deserves to be attended to.

we shall 1st enquire into y^e Facts them-
selves & 2nd into y^e Reason of them.

All Physicians agree in y^e periodical
movements of Fevers, more especially
the Ancients from Hippocrates down-
wards. Ordesiacus was y^e first who

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of the critical Days, or at least of the
general Rules of Hippocrates ^{the} w. re. &
as to quartan & septarian Days. I
believe he maintained their periodical
motions notwithstanding. What Periods do
Fever observe more steadily? The Ancients
agree in their Periods, altho' $\frac{2}{3}$ Moderns
disagree about them ⁱⁿ w. is owing to their
living in more ~~southern~~ northern Countries.
Most of our eminent Practitioners
however have believed in them, & most
of them agree in certain Days. Histories
of Diseases abound w. ^{the} proofs of this. all
negative assertions to $\frac{2}{3}$ contrary are of
but little weight. we shall enquire

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therefore into these Days. Unhappily!
 we have been too much led by Hippocrates
 in pointing them Out. Who is
 indeed often contradictory in his Au:
 of them, ^{we} may be owing to many of
 his works being spurious, & many of
 those ^{we} are his own having suffered by
 being transcribed. Hippocrates himself
 too is to be suspected of being biased to
 Pythagoras: Harmony of Numbers ^{we}
 may have led him to set down some
 things from Theory only. He was besides
 too apt to form general principles.
 in the 36th Aph: of B: IV. he marks out
 1 - 2 - 3 - 5 - 7 - 9 - 11 - 14 - 17 - 20 as critical
 days. There is but One Difficulty in

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admitting these Days. i.e. Hippocrates
 says that critical Days occur Only
 on the Odd Days. now here we see
 several even Days. He says too that
 the Crisis of Fever happen on Quarters
 or Septiman Days. But this arose from
 his Theoretical notions. It is therefore left
 to be attended to. all Physicians agree in
 the Days Hippocrates has pointed out.
Halen & St. Martin who made many
 Observations upon critical Days both
 agree in general upon these Days.

Why are the Movements of Fevers in this
 manner? This is a most difficult Question,
 but we shall attempt it. They appear
 to be founded upon some Law of ^{the} Animal

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Economy. The human body is subject
 to diurnal Revolutions, & once every 24
 hours becomes in every respect alike.
 The ~~two~~ Functions by food & most
 of our Appetites are in some measure
 diurnal. The Fundamental powers of
 the body are not subject to any great
 variety, but are nearly $\frac{1}{4}$ same in all
 Systems. The least Deviation in any of the
 Functions is followed by a contrary
 State of the Body. Thus Lard is induced
 by Sleep, & an increased Quantity
 of Food, by an increased Function of
 Urine & stool. From this we see $\frac{1}{4}$ System
 has a power of preserving its ~~own~~ own
 Balance. But Further, the human

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body is greatly subject to $\frac{2}{y}$ power of
Habit ^{ch} w: determines the Degree Velocity &
Order of all our Actions. from this
any one Action may become periodi:
cal merely from the power of Habit.

The Oceanomy is most uniform in
its Beginning, hence young subjects
are most disposed to $\frac{2}{y}$ power of Habit.

The human Body is besides this expo:
sed to $\frac{2}{y}$ Influence of several Bodies around
us ^{ch} w: are periodical, especially the Sun
& Moon. The Sun more especially Operates
upon our Bodies. we are sure of its

Influence tho' we cannot say how its Acts.
- within the Tropics the Operation of
the Sun is more evidently Observed upon

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the Act of his shining more directly.
- the vicissitudes of Heat & Cold - Light &
Darkness - as well as $\frac{2}{3}$ States of $\frac{2}{3}$ Air
are ^{more} constant in these hot Climates
than the Sun's Action is less inter-
rupted, & periodical Revolutions in $\frac{2}{3}$ Sys-
tem are more easily observed in sou-
thern than in Northern Countries.

The nervous System is the chief Seat of
Habit. & I believe the Operations of
Habit are confined to $\frac{2}{3}$ Sensorium Alter.
- the secondary Effects of Habit appear
in the Other Functions, more especially
in the Sanguiferous System. The Pulse
is slower in $\frac{2}{3}$ Morning - quicker

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at noon - is slow in $\frac{1}{2}$ Afternoon
& quicker in the evening. for a
full Acc^t of these Facts see Dr Robinson's
Animal Economy. I think we may
confide in them, Altho' his Experiments
were not made wth all $\frac{1}{2}$ Accuracy we
could wish. The Variations of the
Fevers are sufficient Demonstrations
of the Truth of them. I have Observed
a Quickness of Pulse from 10 to 20 Beats
in Heats w^{ch} could not depend upon
Diet as the Quickness of Pulse in
Dr Robinson's Experiments might have
done.

All Intermittents come on in the
Forenoon, & generally finish their

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Paroxysm in 12 hours. These regular
Exacerbations appear to be founded
on the diurnal Revolution of γ system.

- But the System is disposed to regular
Periods once in the 48 hours likewise
from Causes ^{wh} I cannot explain.

- I infer it from γ ^{vigilance} ~~unifority~~ of
the Tertian Fevers, ^{wh} we often see
prevented even in continual Fevers.

- Quartans depend upon a less pri-
vatisation of the System as continuation: Fevers

depend upon a greater or upon the
Inflammatory Diathesis. The notion of

γ Dies Empares of Hippocrates has some
Foundation from γ great Disposition

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^{ch} Fevers have to γ ² Tertian Type.

Quartans never occur in γ ² Spring
nor Summer from γ ² Presence of Stimulus
li from Cold & Heat. They occur only
in the Autumn when the system is
subject to less Irritation.

Nature we see then affords periodical
motions ^{ch} is evident from γ Phenomena
of Intermittent Fevers. we presume
these motions ^{are present} in continual Fevers 1:

because continual Fevers are naturally
intermittent in less some stimulating
power occur th them ^{ch} render them
continual. 2: because their Termina-
tions happen upon regular Days ^{ch} w:

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connects wth the tertian or Quartan type.

3.^d They have their exacerbations

& Remissions upon the critical Days

of Hippocrates. They are tertians

in the Beginning, but as y^e System

becomes weak they assume y^e Form

of Quartans w^{ch} is generally about y^e

11th Day. — 4.th They have exacerbations

& Remissions twice a day w^{ch} I believe

arises from the Influence of y^e Sun.

The Attention to Indications of Cure in fevers tends
much to illustrate the Method of Cure.

To come at this I began the curious Question of
natures curing fevers — I believed the Doctrine of Con-
coction & Expulsion of morbid Matter was exploded
as not to require a Refutation — I took notice of the opi-
nion substituted by those who suppose fevers owing to
Inflammation the Cure depending on removing this.

The Spasm does very generally attend Fevers & often occasions the Continuance of them: yet this is not always the Cause. In all Fevers there is a Condition previous to the Spasm, which is to be considered as the Cause of the Disease & therefore the removal of this must give the Cure. — This Condition I have said consists in a certain Debility of the Sensorium or an Interruption or Resistance to its Influence, by which the Power is not distributed equally to its various parts of its System. Thus in the sanguiferous System in greater Proportion than in the animal Organs being greater Proportion distributed to the Head & larger Arteries than to the Extremities. Nature then cures Fevers by removing this Interruption or Resistance to the action of the Sensorium. This is favoured by the whole Phenomena of Fevers & will plainer appear hereafter in the Means employed to remove Fevers.

This is a Doctrine that will be difficultly received: for the Debility of the System seems constantly to be going on in Fevers. Nay, the Debility is often greatest when the Disease is gone. The Debility I suppose the Foundation of Fevers, tho' in some measure universal, is yet unequal, more of it in the extremities than the origin of Nerves, more in animal than vital Organs & more in the Extremities of the Arterious System than in large Trunks, as I have observed. The Cure does not therefore depend alone on restoring the Vigor of the nervous Power but likewise on restoring

The equable Distribution of it most especially to the extreme
Arteries. - While the Elasticity or Resistance remains,
the Spasm will necessarily be renewed, as it proves a Stimulus
to the Sensorium & to the Heart & Arteries -
We must enquire the Means by which Nature removes this
condition.

This is partly done by a reaction of the Sensorium
in an increased Action of the Heart & Arteries. The first
cannot so well explain, but the 2^d is one of the chief
Means, of keeping up the Excitement of the Sensorium.
Having considered the Termination of Fevers in Health,
we must consider their Termination in Death. A difficult
Problem not yet solved.

Now here consider the General Causes of Death.

Death is the entire Absolution of the Excitement of the
Nervous Power in the Sensorium. - It will be useful
to explain the Term Excitement. I suppose it understood
that the vital Principles in Animals is seated in the
Nervous System & more especially in the Sensorium.
Every Function of the animal System depends on the
Nerves. -

The Activity of the Sensorium & of the nervous Power
in general depends on a subtle elastic Fluid con-
fined to the medullary Substance -

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2. This subtle Fluid is a Portion of that Ether which Philosophers now agree exists in common to all Bodies, as connected with a State of Motion it has no separate Motion, & only such as are attended with Change of Motion, but in certain Circumstances it may in certain Bodies be so collected as to have Motion communicated thro it, without Motion in the solid Parts. - We have an Instance in Magnetism & Electricity. This I call the excited State of the nervous system. - For this Excitement of the Sensorium does life consist.

Supposing such an Excitement. It is in different Degrees in different States of an animal Economy. It may be from the highest maniacal State to the lowest Degree of waking Animals; below this is the State of sleeping Animals, where Excitement is so weak that it is not sufficient for the animal Functions. - A lower Degree is that of Syncope. Here the Heart & Arteries are excited in the weakest Degree sensible, but the Sensorium is so far excited as to be capable of reacting & giving Action of Heart & Lungs. A lower Degree is ^{Heart & Lungs} ~~Asphyxia~~ ^{are} ~~in which~~ ^{are} ~~stagnated~~ ^{stagnated} but here as Life often returns so much, suppose so much excitement as to be acted on by Impulse.

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When the Excitement is below this, so as not to be capable of Excitement it is Death.

We are now to say how Death is to be brought on in general.

It will depend on Powers destroying nervous Power excited.

Powers destroying the Organs on which Excitement depends. The 1st Means of Excitement we find to be Heat & this is as necessary for its support. Cold then will have a Contrary Effect & Action in killing Animals will readily be allowed to be on the nervous Powers. Any thing in fluids or Organs is to be considered as Cause or means. If this is a doubtful Instance, it will be attended wth regard to Powers. Many operate so suddenly as to give no suspicion or Proof of Action in any Part but the nervous System.

The Circulation of the Blood is necessary to support this Excitement, as appears from the Effects of stopping the Impulse of the Blood to the Brain or directing it to a greater Portion. It is most necessary in warm Animals & particularly in Man. What then interrupts the Action of the Heart, puts an End to Life.

Pathologists have thought it sufficient to explain Death by showing how the Heart stops - but in the Beginning of life it appears that the Sensorium

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is excited previous to the Heart's Action. And we further find that by withdrawing the Energy of the Sensorium we stop the Heart's action.

The Pathologists have constantly marked the ceasing of the Heart's Action as the Cause of Death, yet they have not determined how this operates.

Many Functions must stop with the Heart, but this does not explain the ceasing of the vital Principle.

Thus the Amphibia whose Excitement depends less on the Impulse of the Blood, thus may be interrupted long without Death.

Physicians have explained it from supposing a Function in the Brain which requires the Presence of the Impulse of the Blood. Thus may be a Secretion, the most necessary for the Purposes of Sense & Motion. Whether what we have said is just, it reduces it at least to a simple System that life consists in an Excitement of the Sensorium, Death in entire Abolition of this. The Causes then may be direct or indirect. Direct are the Causes immediately taking Excitement. Indirect those that destroy Organs necessary to the Excitement.

The Direct

- 1 Sedative Poisons
- 2 Violent Excitement
- 3 Certain Poisons

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4 Cold

5 Compression

6 Destruction of the Texture of the Sensorium.

As to the 1st I need not say, all reflex sensations are Stimulant or sedative. That is increased or diminished excitement of the Sensorium. how they operate I cannot say, ^{this in fact} ~~they~~ ^{is} certain.

Examples of grief destroying the System & bringing on Death.

More evident Examples in Fear. The sudden Deaths of the Plague have been referred to Fear - This we must at least allow a ~~very~~ powerful concurring Cause -

2^d Violent Excitement - The only Explanation is that it seems to be the Nature of the Sensorium, all Exercise of its Excitement diminishes this. Hence we explain why Exercise attending Labour brings on Sleep. In ordinary Cases we can perceive this Exercise induce Sleep more or less irresistibly as the Exercise has more or less violent.

All pleasant sensations, Emotions, so are the State of Excitement that induce Debility & often Death.

It is allowed that all these tho immediately confined to the nervous System diminish Excitement.

It has often brought on Death - Convulsions

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are a high Degree of Excitement, & always terminate in
Debility or Death.

This shews then that violent Excitement may be
the Cause of Death & hence the violent Excitement

in Fevers may be a concurring Cause of Death.

Dr Pungle asserts in his Causes of Fevers that a few

Paroxysms brought down the strongest Men so as
not to stand. There are no very violent Sweats, & was

the weakening Power of the Miasma remarkable in

the Cases.

Debility then in Fevers must be referred considerably

to the Excitement in the Paroxysms & therefore this

in Fevers may induce Death.

3 Poisons - unnecessary to define the Term exactly, but

to say how the several Powers operate. There are

Powers that evidently destroy life, the only received in

very small Quantities. Many do this by acting

solely on the nervous Power. We as evidently see

to in many that They operate as sedative Powers.

And when they are very suddenly fatal, we must

refer it to the sedative Power in excess.

How they operate is not explained, we must only en-

quire if Persons concur in the Death of Fevers.

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small Part of the System often induces Death, & The Action first appears in weakening the Power of the Sensorium. It is so quick often that we would not refer it to Fluids being unfit for Secretion, but rather to a poisonous Vapour acting on the Nerves.

With regard to Miasm & Contagion we have rendered it probable that they arise from Fermentations of the Putrefactive Kind. And tho not exactly putrid, yet have somewhat of the same Virulency.

We perceive in general their sedative Effects, & tho they sometimes occasion the Reaction of the Sensorium so as to give Fever, yet often in such a Degree as to bring Death suddenly. Thus at Marseilles Death came on after the first symptoms had appear'd only two Hours. A further Analogy between Miasma, Contagion & putrid Matters appear by the Matter supplying

Putrefaction in Fevers has been refer'd both to the Effect of Fever & to a Putrid Ferment. In the greater Number of Putrid Fevers, the Introduction of a Ferment is the most common.

I conclude then That one of the most universal Causes of Death is a peculiar Poison that destroys the Excitement of the Sensorium.

There are 4 Cases of the Operation of this Poison.

1st It may depend on the State of the Person accompanying the Miasma & Contagion.

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2^d When the Poison is in the Miasmata or Contagion, tho it is not in sufficient Quantity to give Death, yet con-
 uining with a violent Exultement may kill in a few
 Paroxysms.

3^d When in neither Cases it would kill, yet by being mul-
 tiplied by Fermentation they encrease in Quantity
 as to give the Effects.

4th When neither of the three happens; but as a Ferment
 produces such a Deposition of the Blood, the sedative power
 relaxes the Vessels as to occasion
 them become putrid & then are a sufficient Cause.

The last is the most common & universal Cause in Fevers.
 examine the various Histories of the malignant & putrid
 Fevers & you will see very generally some Sphacelus or
 Mortification.

5th Operation of Gods. I spoke of it before, and is an
 Effect of nor is the --

6th Compression. I need not say that Compression of the
 Sensorium not only occasions Action but may give
 sudden Death. but it is seldom the Natural Effect of Fevers.
 The Appearance of Apoplexy & occur frequen-
 ly, but we shall endeavour to shew

rather than Compression of the Sensorium.

7th Destruction of the Texture of the Sensorium. This
 from the encreased Impetuosity in Fevers & Delicacy
 of the Brain has been frequently supposed. We do not
 however know the Operation or Signs of it. I would doubt

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& I would not allow it a Common Cause.

Considerable topical Affections of the Brain often sub-
sist long wth Life. - in small Lesions that give Death,
it is to be attributed perhaps rather to violent Ex-
citement & Irritation, than the Destruction of Texture.

Boerhaave thus explains Death in Fevers & Van
Swieten endeavours to support it by reasoning - but
they are both ^{found to be} ~~it~~ wrong. It is a supposition of extreme Vessels being
greater in Proportion than the Trunks w^{ch} is directly
contradicted by Dr Withering's Experiments.

Again he supposes a disorder of the Fluids w^{ch} by
increased Impulse clogs up the Vessels, yet he in
other Places refers them rather to an Affection of Im-
putum faciens.

If these direct Causes then, two only seem to operate
in Fevers viz Violent Excitement & Poisons.

The last may operate by being alone, or with miasma^{ta}
& Contagion or by Putrefaction in consequence of topi-
cal Effusion.

I did not think it necessary to speak of the Mors senilis.
The other Causes are such as tend to an entire Abolition
of Excitement. They are direct or indirect.

The Direct may be referred to 6 Heads. As to the last
the Destruction of the Texture of the Brain, Dr Simpson
would not allow it as he endeavours to show that animals
might live without Brain; but he pushes it too far.

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The Causes taking place Fevers perhaps may be reduced to Poisons or violent Excitements.

The Indirect act on the Organs necessary for Circulation.

The Causes interrupting it are more remote or direct.

The more remote are stopping the Supply of Chyle, hence cutting the Thoracic Duct is certainly fatal. More direct are Evacuations excessive. more immediate still are Erosions of the Heart. next obstruction to the Heart as Polypus.

The Causes interrupting Passage thro the Lungs are numerous. Those connected with the Fever, only are perhaps Inflammations of the Lungs by the consequent Effusion. All these act only by preventing the Impetus of the Blood & therefore take off Excitement.

In Fevers a stimulant, sedative & septic Power occurs. any one in Excess may give Death.

Stimulant Power gives greater Spasm & increases the Excitement. The Stimulants besides may occasion particular Effusions & thereby in the Lungs suffocate or in other Parts give rise to a putrid Poison.

The Sedative concurring with other Causes may kill. or it may be sufficient alone or may be rendered sufficient by multiplication or by occasioning Effusion give Rise to Putrefaction.

The septic Ferment may act as sedative & by inducing a putrid State may give a more fatal Poison.

This Connection ~~is~~ of - - the Causes inducing Death in Fevers & the Causes originally supposed to take

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place in Fevers appears too on the Principle genera of Inflammatory nervous & putrid.

There is a Foundation for Prognosticks; let us find if the Symptoms importing Danger are reconcilable to a Doctrine of Causes. I shall enumerate the Symptoms as belonging to 4 Stimulant, sedative & septic Powers. We shall see how the Experience of Ages agrees wth our Causes. The Prevalence of stimulant Power & its chief Effect - the Phlogiston, Diathesis & a Consequence of this passion is conceived by the State of the Pulse & of the Heat of the Body. By the State of the Pulse as more frequent. This it may be said is often from Weakness; but when with any Degree of Hardness or Fullness it is a Mark of Stimulus & Irritation.

Besides Frequency & Celerity of each Stroke may be taken in as a sign of Stimulus. In most Pulses not above 100 I can observe the Celerity of each Pulse accompanying the Frequency of their Repetition.

that cannot be perceived.

Frequent Pulse from Irritation is inferred from Hardness. This becomes ambiguous often from weakness; but this will arise from the Tension & therefore ~~Excepting~~ in very violent Contagion, a small Pulse is often a Mark of Irritation - Hence after Bleeding often makes it fuller & softer.

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but only as the putrid is connected wth a Stimulant -
Heat coincides surprisingly with the state of ^{the} sanguif-
erous System, & therefore Heat shows ^e Presence of Stimulus
the more subtle Distinction of a later

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not certain of - The Heat is expressed, fixed on the State
of the Tongue as more or less covered with Muc. To pre-
serve the Tongue fit for Taste, there is a moderate exhalation
of a fluid & leaves on evaporation a thicker Part. In
Infants & Children the fluids are so thin as not to give
sediment but this always happens more or less in Adults
and when the Heat of Fevers exhalates more than is more
mucous sediment. It goes so far as to give a dry crust.
Why it changes colour we cannot explain.

Heat is expressed by thirst from the Mouth & Fauces
becoming very dry. But Heat is not the only Cause of Thirst
thus Spasm in a Cold St. Putrid Matter in the Stomach,
Dyspepsia &c. too are connected on the surface of the
Body

& scanty high coloured urine. This is a sign of Heat
& of the Determination at least of Expiration to ^e
skin. Perhaps the Heat occasions the Blood to part
with more of the colouring Parts of Urine.

The Absence of Permission - I have endeavoured to show
that the Protraction of Paroxysms depend on Stimulant
Powers. But this Stimulus may be conditioned with
Debility & Septic, & when these act we shall find the

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Symptoms of the Stimulus proportionally lessened.

The Inflammatory Fever from violent Excitement may be dangerous, yet it is the safest Fever when not attended wth topical Affection. The Inflammatory State only becomes dangerous perhaps when there is Determination to the internal Parts. I cannot help illustrating this by the safety of the Rheumatism when the Determination is to the external Parts. A Practitioner of 20 Years said he never saw Death from the Rheumatic Fever. In 30 Years I never saw it except when ending in a Topical Determination. These Determinations I refer to 3 Heads.

1 Determination to ^{the} Brain

2 ————— to the Lungs

3 ————— to the Abdominal Viscera.

As to the 1st it arises from the laws of Circulation. — in the increased Action of the Heart & Arteries — must without topical Causes necessarily take place to the Head; & is found in the

Sweating in consequence of this Determination appears first on the Face & perhaps Extremities.

The Determination is discovered by an unusual Pulsation of the Temporal Artery, a Swelling of the Face, protruberant & inflamed Eyes — increased Sensibility of Sight & — Violence of Head-ach — Constant Watching, Violence of Delirium.

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These are not ambiguous wth regard to Cause, except Delirium - This is to be distinguished by the Mode of Delirium, being etc being attended with greater Rapidity of Thought, by Impetuosity of Emotion & Passion. Where these concur with other Symptoms I take it as a Mark of increased Impetus of the Blood to the Head.

The Congestion is generally the Cause of Inflammatory Spasm, yet the Spasm increased may give the Congestion - hence Phrenitis may arise. Therefore an Irritation fixed to the most tender Part.

2. Determination to the Lungs - From their Nature & Function every increased Velocity of the Blood must especially be felt there as as much must pass thro them as thro the whole System.

But then they are exposed to the Air; from both which Peripneumony is the most common Inflammation.

The increased Velocity in the Lungs gives difficult Respiration. The intercostal Muscles are taken in often & shew it more laborious. But often too all the Muscles are employed that can move the Ribs. A difficult Respiration then will express a particular Determination to the Lungs. - The same is expressed by the Decubitus difficilis. Tho this may arise from Affections of the other Viscera yet in general it happens from the Lungs.

It will be more fully expressed by Pain of the Thorax, Cough & more Certainty of Spough is attended wth external Symptoms. The strongest Degree of Respiration is expressed by a Torpor of Countenance & a more bloated look.

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Appearance than in Determinations to the Brain -
 3^d The Determination to other internal Parts. tho not vital,
 yet as giving Irritation from Congestion, & especially
 as these Viscera are liable to Effusions, & from Suppu-
 ration or Putrefaction may bring on Death, hence topical
 Affections of the abdomen are dangerous.

Often Detected only by Insensibility but in general are to be
 inferred 1st from Vomiting. This may arise from a certain
 State of the Sensorium or Surface, but when not to be sup-
 posed by saline Diarrhoea or Spasms, it is a Symptom
 of inflamed Viscera - more certainly of a Painful Ten-
 sion of the Abdomen, as happens in Intermittents or
 continueds from this. As such Fevers were chiefly Ob-
 jects of the Antient Practice, so they speak most of
 Inflammations of the Liver, Spleen &c. Tension then in
 general & Inflammation may be marked by topical
 Determination to the abdominal Viscera more certain-
 ly if there is Local Pain -

The Effects of Stimulus becomes more dangerous as com-
 bined wth Sedatives or Septic Powers, as it not only increases
 its own Effects, but as it aggravates the Effect of Cause.
 As increasing the Tendency of Spasm & giving the Effusion
 that may be dangerous -

The Prevalence of Sedative Power may depend on various
 Causes.

1st As the ^{Sensorium} ~~Power~~ is weak from Evacuation, Disease, grief
 watching &c.

2^d on the Powers of the Masses & Contagion

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3^d As with (2) The concurrence of Fear & Despair. The Presence of these are often the Marks of the Strength of the Cause, but without this Timidity may conclude.

4th Persecution of Paroxysms.

5th Excessive Evacuation.

6th In consequence of the Cause being increased by Multiplication.

7th A Particular Generation of Putrid Matter.

8th Shall mention the Signs of Debility in the 3 sets of Functions. - vital, natural & animal.

the symptoms as arising in the several Functions.

In an animal as they affect voluntary Motion. Debility appears from a considerable loss of the sense of Debility preceding the more formal Attack of the Disorder.

On the Attack it appears more by the loss of muscular strength.

At first the Debility of muscular strength amounts to the Difficulty of keeping on his Legs. he at first can support himself in a sitting Posture further on he cannot bear this. he lies along, when few Muscles are employed in lying abed we see the Progress of the muscular Debility, in the Facility with which he turns.

At last he cannot turn except by the Assistance of a Gyrobander, & even here we may observe him to contribute more or less - lies at last on one side & further can only lie on his Back. further if the Bed declines he cannot support himself from sliding down. goes forth when he exerts himself by erecting his knees to prevent

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The weakness is further expressed by this, that every Effort of muscular Action is attended wth Tremor, the certain Sign of considerable Atonia - not so mortal when affecting whole limbs: but if confined to small Parts as the Tongue over w^{ch} we have more Command, it is worse. Still more when the Motion of the Eye-lids are attended wth Spasm - when they are convulsed in squinting appears when the Ball turns up, & the Eye lid does not, even from the long Habit, follow it. - Convulsions express great Debility, w^{ch} are as much the Effect of this as Irritation. - Accordingly all mortal Powers have convulsions at the last. In Hemorrhages for the last Effects are expressed by Convulsions. These Symptoms exasperated are expressive of the weakening Cause of Fevers. Next in Sense & Thought. The particular Symptom here is the Tone of the Mind. Dejection & Despair either in Sentiments or Countenance. A certain Tone of Mind attended a certain State of Body, one is attended with Cheerfulness & Hope, Courage & Activity; another wth Sadness, Timidity & Despair. From a Number of Instances in w^{ch} they occur, we can say they are nearly as the vigor of the sensorium. - It applies too pretty generally to the Vigor of the system in general. Dejection then & Despair arising from the Disease in Persons of Hope & Courage give great Marks of Debility. -

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If expressed in the Countenance the outer Sentiment.
we may suppose the same State of the Sensorium.

In a Person of Health the Eye is open, is directed to a
particular Object Steadily & is directed to a Diversity with
Rapidity as quick as Thought. There is a certain Age-
ility in the Muscles of the Face too. Debility then occurs
When the Eye scarcely opens when it wanders languidly
When loose in its Attention. When the Muscles are
lax & expressive of Despair. - I find takes her chief
Prognostic from the Expression of the Countenance.
The rest of the Symptoms of Sense & Thought I ascribe
rather the resistance to its Action of the Sensorium.
Thus it appears in a Confusion of the Head, when
Recollection is not easy, & the Mind does not pass from
one Idea to its usual Associate, proceeding at last
to almost a Loss of Memory. This we must suppose
to depend on an Interruption of the Motions on which
these all probably depend.

The Resistance appears when the Ideas are incohe-
rent. This is the State of Delirium. It might be proved
that all Incoherence of Thought depended on an
unequal Excitement of the Sensorium. - We may
suppose it to arise from Absence of Excitement on
one Part, or the unequal Excitement in one.
Excitement appears to depend on the Action of the
Heart & Arteries most; but this increased does not
give Delirium except Resistance in one Part.

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On this supposition it may be of 2 sorts -

Resistance may not be very great, & yet great Impetus
excite Delirium. If Impetus not very great & yet
Resistance very great Part. Incoherency may arise -
Then Delirium appears without great Impetus;
then with the symptoms of Delirity. When the Inco-
herence of thought is not rapid & attended with violent
Emotions. All these symptoms I take as Marks of Delir-
ity or Resistance in some Part of the Sensorium.
It will appear more when it is connected with a State
of Sleep. The ordinary Impetus in unequal Exer-
cise is sufficient to give Delirium. Thus every
Man more or less determines on going to or coming
from Sleep. - Certain Associations are so constant
as long established as to remain in some Delirium.
If these then are interrupted, greater signs of Resistance.
Thus the forgetting Drink when called for. or evac-
uating Excretions without calling for the Instru-
ments usually requires. All uncon-
scious Excretions then are a very bad sign. That is
when evacuated in the usual Way, & from paralysis
of Sphincters. - Insensibility to Thirst, when
Heat & other Causes subsist is a great Mark of Dis-
ruption to the Functions of the Sensorium.
It goes further when the Insensibility of the other
Senses takes Place, as False Vision or Loss of Sight.

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The most ordinary Instance of this false Vision, is when he endeavours to remove false Objects on the Bed Cloaths from him. - Still further when a State of Sleep comes on. - Sleep in Fevers is not reckoned a bad Symptom if the Sleep is natural. But we distinguish between Sleep & Coma. Coma is Sleep in a higher Degree than Natural.

Sleep in healthy Persons may be from Compression or a collapse or sinking of Excitement.

That the Coma of Fevers depends on the latter is evident from its appearing in the natural Way & only arising to a greater Degree of Sleep. Thus these Degrees. Proceed only an Excess of the same Nature from the Swiftness of Recovery as often happens. Compressions from Effusions &c. are seldom so soon removed as not to leave some Effect.

In the Vital Functions of Circulation, we first mention as a Mark of the weak Action of ^{the} Heart, when it cannot bear the Action of Gravity in the Blood & therefore not project the Blood in an erect Posture so as to keep up its Action & excite the Brain. This might be reckoned an Effect of the animal Functions, but when Liddiness is preceded by Tremulousness. I consider it as a Symptom of weakness of Heart: deep Ambiguity in the Pulse. Great frequency is a mark of that Debility of Heart, when

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It does not evacuate itself & therefore is soon filled and irritated to contraction.

We said Frequency was also a mark of Irritation; but we may especially reckon it from Debility, where it is weak, more if irregular, & further if concurring with the symptoms of Debility.

We have an Instance of Debility too in Slowness of Pulse sometimes.

This is difficult to explain. we can say that When the Pulse is slow in proportion to the Affection of the Sensorium. - We may reckon it a Mark of Weakness. It is a sign that the Energy of the Sensorium is not excited towards the Heart. This will explain the Slowness of the Pulse in nervous Fevers when the Sensorium seems evidently affected.

Heat when lower in Proportion than would be expected from a feverish State, it is a certain sign of weak Action of the Heart in consequence of weak Energy of the Sensorium.

We may explain animal Heat variously, but it is somehow connected wth a certain Action of the Heart & Arteries. Debility appears in the Lungs when respiration is small. i.e., when the contraction of the Diaphragm is not excited with sufficient Force & extent. When neither this or Intercostals are able to dilate the Thorax sufficiently.

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becomes extremely frequent, thus if a Person on speaking a little, taking a Drink or moving himself, is affected with very frequent Respiration, it is a Mark of Debility. Labourous Respiration is in very different Degrees & a mark of Debility. We labour some when we take in the Air: still further Debility when we require the Muscles between the Scapula & Ribs. And a fixed Band must be given that they may act. When their Head is stretched or Scapula raised, it is a mark of great Debility. Still more when we take in the feeble Assistance of the Pann. Varium to impel as it were the Air into the Lungs.

In this Subject we must add the Change in the Tone of the Visceral Voice

The Tone of the Voice depends on the Organ of Respiration being so far under Command as to push the Air as the Expression of Sounds require. When the Muscles of the Glottis, when Health we govern with great accuracy & when Debility it is a remarkable sign & still more when it arises to a perfect Aphonia.

Besides these Symptoms when the Heart does not propel the Blood to the Extremities so as to be cold, it is a great Mark of Debility. When Colour fails in the Eyes & Face it is a great Mark of weak Circulation. Still more if besides Change of Colour, there is a shrinking of the Face, the Hollow Eyes, Cheeks & other signs of the facies

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In the natural Functions of Appetite & Lactation we must consider the Symptoms without examining the Connection of the Stomach & Sensorium. It is a fact of Vomiting is a Mark of Debility and since so frequently attends Delirium & Trismus. If the State of the Sensorium depends on the Impulse of the Blood in the carotid Arteries, we may readily explain the Want of Appetite. We might explain this Want of Appetite otherwise, but in general it is a mark of Debility as it often proceeds in proportion to the Symptoms of Debility.

In the Excretions

The outlets of Economy

for certain purposes are provided with certain Sphincters that do not open except in necessary Evacuations when this Constitution is also ticked it is a great Mark of Debility; The Difficulty of Deglutition is a considerable Mark. You may enumerate many other Symptoms of Debility. I have mentioned enough for you to judge of the Strength of the sedative Cause & of Danger. I must add that all these Marks are more dangerous when connected with a Stimulant Power. When this happens appears from considerable Sensibility at the Beginning of a Disease, while Marks of Irritation in its Progress are not so prevalent. Interrupted Sleep, Languor & Drowsiness show Marks of Debility, but when they are interrupted it is a Sign of Irritation. Still more

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When there happens watching for Nights & Days - The
 Irritation is expressed when without violent Emotions,
 there is constant Restlessness & Desire to get out of Bed -
 When Vision is quite destroyed, there is often a Contractio
 Manuum joined to the impatience of getting out of
 Bed, which is a mark of some Irritation. - A great Frequency
 of a weak contracted Pulse will be a mark of Debility, but
 is especially a Mark of Irritation subsisting & great De-
 bility. - When Spasm subsists & great Debility, a Mark
 of Irritation - hence termed there in Fevers is ge-
 nerally a Mark of Irritation - Convulsive Motions
 often occur in Irritation & Debility as
 subultus Tendinum.

When we consider how often Miasmata & Contagion
 are connected at Putrefaction & how often they have
 more or less of Septic Ferment.

We shall think that the Poison of Fevers is centered
 almost entirely in that of the Putrid Kind, as would
 not entirely refer to this, the no where greater danger
 than in those Cases where Tendency to Putrefaction appears.
 The Tendency to Putrefaction is expressed first by Nausea
 & Thirst. The Presence of putrid Matter in the Stomach
 is attended wth Nausea. When no Putrid Matter is known
 or any Reason to suspect that the Matters have become
 yet if very considerable Nausea we may suspect a
 tendency to Putrefaction - even vegetable Matters may

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become putrid, & therefore is such Nausea excited for
taking of all Appetite for Food, & giving great Thirst
that Drink may be taken in to dilute the Putrid
Matter & promote its Excretion by Emmenorrhois.
Hence great Thirst a Sign of Putrefaction. These are
ambiguous, - more certain and offensive Tastes in
the Mouth, & Taste of Breath may be a very strong
Mark.

Now we may distinguish it in the Color of Urine -
High coloured Urine we said attended Stimulus, but a
Difference between this & that peculiar to Putrefaction.
The latter is not the high coloured brown but has more
red & generally turbid.

Frequency of loose Stool if these are very fastid. vari-
ous Causes of Diarrhoea in Fevers but especially
from acid Bile in the Intestines. It appears that
Bile is thrown in great Quantity on the Intestines
especially in putrid Fevers.

It is most disposed perhaps to the Putrefaction of our
Fluids. However it be certain it is, that it accompanies
the Marks of Putrefaction & is favoured by Stagnation
in the Intestines.

More certain Marks are the Deposition of the Blood -
When by coagulation it becomes a gelatinous Mass, with-
out the usual Separation of Crassamentum & Serum.
This is hardly to be influenced by the manner of Dressing.

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Therefore when appearing much, it is a Mark of the
system having lost some Power of correcting & this the
consequence of Putrefaction.

When the Coagulum is formed the Matter may be
doubtful, but the Colour of the Serum has influenced
the Globules are to be dissolved in Serum as to give
the Appearance of the *Albumen Carnium*. It is a mark
even without this, a yellow Colour is a sign of Putrefaction.
The Yellow arises from this, or from a reabsorption of
Bile. When no Cause w^d could give Rise to this Presu-
mption, it must be I think referred to the other Cause.
Cases where the Matter is more ambiguous are those
I have an Inflammatory Buff. This has been ge-
nerally referred to an Inflammatory State tho the
Theory is false, for in the Leucy & other Diseases of
that Description this has appeared. It is not then a
negative to Putrefaction & besides it does not appear much
concretion as that in the pure Inflammatory.
I have seen the *Lymphe* separate but it was
between it & the Globules was a gelatinous Mass.
It is too in less Quantity than in the pure Inflamm.
natory. We may still more certainly determine
the solution of the subjacent Globules are more readily
diffusible.

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In consequence of this Dissolution Hemorrhages are re-
garded a Mark of Putrefaction. Partly is this owing to a cer-
tain Attonia taking place in the Vessels at the same time.
The Effusions appear in different Shapes. In Women by
the Catamenia appearing before the usual Period. When
discovered first by a very dark red & often a subsiding to the
bottom. The Nose is subject to Hemorrhagy. It is a mark
of Putrefaction when without Crisis or Inflammation
Congestion evident. Corners of the Eye & even Pores of the
Skin have poured out Blood. - Blood from various Cir-
cumstances poured into the Alimentary Canal - more or less
thick as it rendered by Vomit or Stool.
It is a mark too when the Blood is effused into the Cellulae
Membranae & the rete mucosum. In a moderate
Degree it produces the Petechia so much spoken of lately.
Death with regard to their Appearance. In the latter
End of a Disorder they may not only depend on Dissolu-
tion, but also on relaxation of Vessels. Hence may
perhaps prove critical. They may be more innocent
at least when appearing late & without much Marks
of Putrefaction in the first Cause. If occurring at first
they give Sign of the Attonia brought on by the Strength
of Putrefaction. More Dangerous as declining from the
flaid Colour - & still worse when so considerable as
to form Maculae & Libres -

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This the Disposition appears when the Vessels are relaxed so as not to pour out red Globules but the Serum, & gives the yellow or yellowish Tinge. It is not Pale from the Arguments given just now, & especially from the very great Marks of Putrefaction in this Fever. Yellow Effusions are likewise in the Pelious Fever of the West Indies, but the marsh Fevers of more northern Climates. These are of the same kind only in the last comes on later & there is more as being more from Relaxation than Disposition may prove critical.

The Tator of Effusions gives a Mark. Thus the Tator from Discharges of Effusion, faded sweats. I cannot well distinguish the various Degrees of but offensive Hours in sweat & Perspiration are often forerunners of what Authors distinguish under the Title of Cadaverous Odor. It occurs often some Days before Death & is a very certain Sign of its approach. This putrid State may be continued at an inflammatory or stimulant & especially at the last, with a State of Debility or sedative.

We have now gone over the Symptoms of Fevers as changed as they express Irritation, Debility or Putrefaction. I conclude this Subject of Prognosticity observing that there is generally a Concurrence of these Powers, & their Degree must determine our Judgments.

This leads us next to the Method of Cure we cannot

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give a Method as applicable to particular Species, as we have not ascertained them. We shall only give a generic one as applicable to genera. In all Nature where there is Uniformity in Principles, yet thro each particular they are such subtle Differences as often escape us. - Our conduct must be regulated by generalizing our views - Our Method perhaps will apply however to Differences of Species & Varieties of Varieties - for if we had entered on it we should chiefly insisted upon the Difficulty of establishing & the Limits to be observed - What we have said of the Causes & Prognostics lays a Foundation for the Method of Cure - Our Causes agree'd the generally established genera of Fevers, of Inflammatory, nervous & putrid.

My Plan of Cure is to be reduced to the 3 general Indications corresponding to the Causes of their genera, as Stimulants, Sedative & soporific Power prevailing -

- 1st To take off Excess of Spasm.
- 2^d To restore Vigor of the Sensorium, especially the equal Distribution of the nervous Power
- 3^d To obviate Putrefaction.

The Part of our System will be conform'd from our finding the most confirmed Remedies arrange themselves under these Heads.

- 1st To obviate the Excess of Spasm we employ
- 1st The antispasmodic Regimen, consisting in the

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moderating their Irritations that are constantly & unavoidably applied to the System, & at the same Time amending every other Irritation within or without.

2^d Remedies suited to take off Phlogistic Tension - viz Bleeding (considered as an Evacuation) & the Medicines called *aperients*.

To restore Vigor of Sensorium. &c.

For this Purpose we employ Diluents, Neutrals, Sudorifics, emetics, Blisters, warm Bathing, cold Drinks & cold Bathing, Cordials, Antispasmodics & Tonics. I have chosen single Terms. What has been meant under each will appear hereafter.

III To obviate Putrefaction we employ certain Means of withdrawing the Forces, antiscorbutics, & Tonics. Let us consider them particularly & 1st Antiphlogistic Regimen so called because most fitted to the Cases where Phlogistic Diathesis takes Place.

It consists in avoiding all Irritation - This Attention is indicated in all Fevers. Certainly in all States of a Fever where any hot fit yet subsists - yet making this universal is wrong - For as Fevers arise from different Causes, it will appear that seeming Irritations are proper. There are no Doubts, it indeed will seldom occur at first. However in the later Stages too we shall find that the Presence of an Inflammatory State may render the avoiding this necessary.

In Cases of creative & Septic Powers, this is Doubtless



especially with Stimulants applied to the Sensorium only appear allowable. But wherein Spasms exist perhaps Stimulants are hurtful. All the Cases I can find where Stimulants are proper are attended with little or no Spasm. In Cold Fits & Fevers they may be admissible if we can prevent the approach before the Spasm is formed; but here is Spasm bred. In Intermitents after Paroxysm is come on, every Stimulus tends to lengthen the Fit. & are serviceable only in Intermissions. Another can or may be in Continued Fevers in the latter case ambiguity for the Inflammatory Congestion may be when we do not readily perceive it. We conclude therefore that Stimulants are not admissible as long as the Fit Fit remains.

The Particulars of an Iphlogistic Regimen are

1st To avoid Sensations Thence avoid Light & Noise but more especially so we avoid Impressions & Sensations that occasion Excitation of Thought. But Thinking is difficultly avoided & rather only difficult especially in the Beginning of Delirium. This consideration gives rise to a Doubt with regard to the general Rule of avoiding Impressions. For in the same thing Thoughts of Delirious Persons I think I have found Light & Noise necessary to bring back our ordinary Train. This is more necessary when if Delirium is accompanied with violent Excitement. I have frequently put off a Tendency to Delirium by having light or a companion ~~quit~~ quit of the Sensations from external Impressions.

2^d The avoiding Bodily Motion - Motion of all kinds

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an Irritation to the Sensorium; but if we consider how much the Tension of Muscles is connected, the Erection of Muscles influence the Tension of the whole System. This is not attended to. I think that our Views in (Bleed) are often frustrated by keeping the Body in a Position when many Muscles are in Action. Hence the Advantages of Bleeding in a declining Position, not enough considered. The least muscular Action is excited when we lie on the Back - but this is not eligible as it retards the Return of the Blood to the Head. The Head then should be raised & the Tendency to slide down may be obviated by raising the Feet, provided this can be done without raising the Head. especially in Motion to be avoided when accompanied with Tremor or Delirium.

The avoiding Heat & Cold - You are doubtless well apprised of the great Powers of Heat & Cold on animal Economy - that they may be Potentia nocentes or useful Remedies, but have that the Transition from one to the other takes Place by very slender Changes in Degree or Circumstances. The Attention to these difficulties, therefore does not depend so much on their Intensity & is as on the relative State of the Body. - I have endeavored to bring out the Principles on this Subject. We said that supposing human in the most perfect State, it is, allowing for Climate nearly at 98° Fahrenheit Temperature of Body would not subside without the

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Medium surrounding it is cooler. Whatever Exceptions the Fact is very general. The supposing the Heat of the Body must depend on the Heat of the External Air. The Temperature of the Air which is best adapted to preserve the Heat of the Body in our Climate is 52° . When above 62° the Body feels hot, when under it cold. To determine their Effects in Fevers. Physicians have observed that a certain Heat was hurtful, but this not sufficiently ascertained. Dr. Sydenham perhaps first observed that Rheumatism & other Inflammations were aggravated by a certain Heat. And his Observation shows that such Heat proves a Considerable Irritation & therefore hurtful in Disorders of the Inflammatory Kind. It appears that in such Cases a Degree of Cold less than 62° is useful. The Question is to determine the Limits of this.

When Diathesis Phlogistica are evident, there is no Danger of applying Cold considerably below 62° . This is a Case in which the Effect is so much determined by the Condition of the Subject as by the Intensity. Here appears that Vigor renders People less affected by Cold & by its generating greater Heat makes a Temperature lower than the Standard necessary.

In the small Pox it now appears that a Considerable Cold is allowable. I explain it from the Irritation of the small Pox having great Stimulus & accordingly after the Eruption the Fever brought is in consequence

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of that Irritation inducing - Diathesis Phlogistica.
 Whenever perhaps there is a hot Fit fully formed, the
 Body as increased in Heat perhaps requires more Cold
 than 62° - Cold then is useful in some Cases, & at least
 in all Fevers every Degree of Heat above 62° is hurtful.
 The Cases in w^h Cold may be hurtful, are when Spasm is
 not yet formed or Hot Fit come on. The Body then is
 in that State of Debility that particularly favours the
 Action of Cold. When therefore Fevers approach very gra-
 dually & with great Debility, the Exposure to Cold gives
 greater Debility & more dangerous Spasm.

At this Time Heat by preventing the sinking of the
 Sensorium & obviating the Constriction of the extreme
 Vessels may be useful.

When in formed Fevers The Sedative prevails & there is
 Danger of the Sensorium sinking in extreme Degree.
 When in Fever it is necessary at the first attack to
 force Sweats Cold is dangerous & Heat is useful.

This usefulness of Heat will appear to you contradi-
 ctory to the universality of antiphlogistic Regimen.
 Still about that all general Stimuli are hurtful, but
 I shall make Exceptions in favour of Stimuli that act
 partially. Thus Heat acts principally on the extreme
 Vessels - relaxes them & gives Rise to & increased Exer-
 cion of nervous Power.

In critical Sweats Heat is admissible. this is confirmed

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by universal Experience, but not easy for Practitioners to apply the Rule. Difficult to determine when Sweats are critical - When Sweats are attended with more softness & fullness of Pulse with less Frequency - When the Flowing of Sweat is attended with Relief of Heat, Thirst, Headach, Delirium, Restlessness & difficult Respiration & with Sleep. There is no Doubt but such Sweats are critical: but that Cold would be hurtful by suppressing it & that a greater Heat of Body may be admissible: but there are Colliquative Sweats in a 2^d Heat that fulfil certain Sweats are salutary if not urged by external Heat, & if so often prove pernicious.

Heat by being pushed too far may encrease the Heat. Hence seasons Topical Determination & therefore the Management of Heat extremely difficult. Critical Sweats then, & certain contagious Disorders which we shall mention, are the only Cases of continued Fevers that admit Heat.

In Intermitents there is both Hot Fit & accession. In the latter Heat admissible, in the former it is so soon to terminate in sweat that we would not apply Cold.

6th Stimulus and Aliment.

Heat. The Action of the Stomach moves & stimulates the system - And hence a frequency of Pulse attends the first Operation of Digestion. Food then is always stimulant. Abstinence then in Fevers is extremely necessary - but as we cannot refrain from some Food, we

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lescence. Hence liquid Food are ^{& alk.}
second avoided as giving Stimulus & increasing putre-
factive Tendency in Fluids. The Rule of this Country
is to abstain entirely from animal Food is proper —
The Antients had a Nicety in giving Diet of ^{what} we know
Nothing. The Inhabitants of warm Climates indeed may
require more regular Food as more sensible to changes. but
their Doctrine was found as much on Theory as Experience.
What is solid in these Observations amounts to this —
If Appetite for Aliment. Thus discovers the tendency
of the Disorder & therefore Stimulus of Aliment is
dangerous. But the the Appetite may guide us & yet
we may very readily go to excess. And therefore this
Rule not so general as that of avoiding Aliment when
no Appetite.

Abstinence is most useful at first. at the latter
end of the Disorder, aliment may be useful to support
strength. In Intermitents we are to take that time
for Aliment most distant from Accession & in conti-
nued we are to give Aliment in the most perfect Re-
mission. This Attention to Time becomes less neces-
sary, as we are cautious in giving mild antiseptic Food.
The Antients rejected properly all odorous & Liqueurs,
that is all Liqueurs impregnated with aromatics & from
all fermented Liqueurs. Hence Wine Disputes with
regard to this, w^h we shall consider hereafter as,

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admissible must be as a Medicine. I do not how-
ever agree wth Celsus in supposing that Abstinence
from usual Wine is of more Consequence than subtract
usual Food; but Food not only stimulates the Stomach
but remains longer & fills the Vessels. - This indeed will
be relative to Habits. If a Person uses vegetable Diet
& much Wine Celsus' Rule may take Place; but Wine
is attended wth considerable Dilution & an agreeable anti-
septic & feed.

As to Stimulants arising from the Body we must avoid
Thirst. This is generally in Proportion to the Demand
of Drink, & when we consider how useful Diluent Drinks
are on several Ac^ts I see no Foundation for some of the
Authors recommending Abstinence from Drink for
3 Days. Thirst as a Stimulant ought on the anti-
phlogistic Plan to be removed. - As to the ancient
Rule a base is explained by Dr Clegborn.

He says in the greatest Urgency of the Thirst in Parox-
ysms of Intermitents the Spanish Physicians do
not give Drink till Sweat is ready to break out.

He finds a Reason first in the great Collection of
Blood in lungs &c. - It would be aggravated by filling
the Stomach. - Besides this, these Physicians say
that Drink tends to prolong the Eff^l & the whole sou:
their Practice has this Tendency. We shall hereafter
explain this perhaps. We may observe that Drink is not

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to be regulated by the Thirst of the Patient.

2^d Qualities of Primæ viæ to be removed, whether from Ingesta or Fluids of Primæ viæ thrown out in too great Quantity or vitiated Quality.

3^d Stimulus from Coarctation. - In all fevers not remarkably below Phlogid, Coarctation commonly occurs. It arises from the general Constriction of Extreme Vessels. The Tension of the elementary Canal has great Effect on that of the System - Hardened Faeces collected then will prove stimulant. But further in Fevers Fluids are accumulated in of abdominal Viscera. This must be increased by the Constriction of Vessels of the Intestines & therefore the relaxing them & evacuating the Faeces will relieve this. Glysters are proper for this, the not more stimulant than need to answer the Purpose, otherwise Purgatives.

4th To obviate the Acrimony of the Fluids in general Every Person will admit that in all Fevers there is a Tendency to Putrefaction & alkaliescence. Hence that this must be moderated by antiseptic Aliment & considerable Dilution. Physicians have often much of the Dissipation of the Fluid Part of the Blood, hence an Insufficiency of the remainder & therefore a Lenta supposed. This allowed, & we shall not now examine, Dilution appears equally

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necessary. Therefore Dilution ^{is} a considerable Part
of antiphlogistic Regimen.

We proceed now to the taking off Excess of Spasm
When it occurs. Many of the Particulars of antiphlo-
gistic Regimen are applicable here. You will easily
discover how many of these Particulars as operating
usual Irritations are withdrawers from Impetus
of System.

We especially however abate Spasm by taking off
arterial Tension particularly that in which Diathesis
Phlogistica consists.

What ~~is~~ Difficulty there may be in explaining
how the increased Force of Arterious System in-
creases Spasm, the fact is certain. For we find
the increased Action of the Arteries greatest in the Phlogomas.
when Phlogistic Diathesis is certainly present.

Because this Diathesis gives longer Fevers when it occurs.

Because whatever Stimulant has the Effect of exciting
Arteries gives greater Spasm, longer Paroxysms, & there-
fore often changes Intermitting Fevers to continued Fevers.

The Remedy of the Phlogistic Diathesis is Blood-letting.
The Tension of Arteries depends partly on ^{the} Increase of the
Action of the Sensorium partly on distending Fluids. Hence
if we consider how evacuating takes off the Tension & how
the Tension of one Part is connected with that of another
we shall see its Effects.

And then V.P. should have the phlogistic Diathesis.

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But the *V.S.* is indicated in so many Fevers, yet we must consider that the Excitement, the vigor of the Sensorium depends on a certain Tension given by the Heart & Arteries to the Vessels of the Sensorium. When Debility prevails in Fevers & they end fatally, it may be not only from Poisons attacking the Sensorium, but may take off the Tone of the Arterial System. Poisons indeed may do this - It appears from the Dissections of the Persons who died of the Plague at Marseilles & others, the Heart was found distended commonly to double its natural size, Arteries full & very turgid wth Blood. Liver commonly of double natural size. all these are to me proofs that the Tone of Arterial System was so weak that the natural Contractility could not unload them as usual. Hence to be considered as a principal cause of the Death.

When Death arises from Causes of Debility it appears in the Weakness of the Pulse. When these Causes of Debility occur, when the Debility is approaching or when Reason to suspect to Debility is soon to prevail it is dangerous to employ means for taking off Tension of the Arterial System - There are therefore limits to *V.S.* even in Fevers very inflammatory. There is not a more difficult Question than when *V.S.* is to be employed in Fevers. There are here 2 general Rules, indicating or contraindicating it.

1st Indicated when Stimulus is more in Proportion than Deductive or Septic. Many circumstances determining this. We know stimulant Power to prevail when at first the Pulse is very frequent, accompanied with Strength & Fullness

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and especially if joined to a sensible Hardness
When considerable Heat too is present & also when the Celerity
of the Stroke is perceptible. This will be more indicated when
appearance of topical Determination, as Head-ach, furious
Delirium, Difficulty of Breathing.

When these Marks are not sufficiently decisive, we take
in other Considerations. Thus when we know that Causes
more evidently stimulant have preceded: as when the
Patient has been exposed to great Heat, labour or Cold.

I would not be positive but Cold may excite Fever alone
it at least determines particularly to Phlogistic Diathesis.

Another Consideration is the previous known Vigour of
the System known to be disposed to Phlogistic Diathesis.
Hence in the robust & youthful. The ancients from their
climates perhaps avoided Bleeding in very young &
very old Persons. The Generality of this Rule was doubted
in Celsius Time. yet certainly old Persons are less
disposed to Phlogistic Diathesis. In very young Persons
the acidity is greater & Tension less. so that V. S. less neces-
sary - In the Advance of Life Caution necessary.

Other Circumstances determine to Phlogistic Diathesis is
as cold Season & cold Climates -

In such perhaps there is always more or less of it, but by
using so freely here, we have badly transferred to warm
climates the same Practice -

V. S. indicated in Proportion to the recency of the Disease
as Reason greater than Phlogistic Diathesis then greatest.

The Contraindications of V. S. are for the most part con-
verse of what we have mentioned. Accordingly forbid where:

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over Sedative Power is present or is expected to prevail
but we are here to determine by symptoms when the Pulse
is not ^{the} quick nor full & especially if weakness of sensor-
ium & animal strength.

Other Considerations where they are ambiguous.

When Sedative Causes have preceded Death may arise.

As Sedative either does at first or soon will succeed.

in Fevers from Miasmata or Contagion Caution is to

be had. We may use V.S. at first perhaps, as much

Inflammatory Affection often attends.

In Miasmata & Contagion V.S. appears in general dan-

gerous. Other causes of Debility influence these as

when the Disorder succeeds large Evacuations, other

Disorders, Grief, Fear, Watching &c.

In all these V.S. is to be abstained from or used

with great Caution.

When Disposition to Debility & Putrefaction. Hence V.S.

carefully to be used in warm Seasons & Climates.

We see warm Weather take off Phlogistic Diathesis & be-

side gives a Tendency to Putrefaction.

As the Disorders have subsisted long & therefore Debility

a Tendency to Debility may be more expected.

If the Diathesis Phlogistica has the chief then in form-

ing continued Fevers. In intermittents we may presume

its Abence. And hence we find Intermittent Diseases

changed from them ~~to~~ ^{re-}mittents do not admit V.S.

If from Phlogistic Diathesis they should particularly re-

quire Bleeding; yet the more of Intermittent in Form, the

more Caution must we have in V.S.

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These are the general Rules of Practice w^{ch} regard to V. S.
These have arisen from Considerations before Trial, but
Practice has furnished us with Signs. If the Pulse becomes
softer after V. S. it is a Sign of Phlogistic Diathesis present
without great Debility the frequency & Celerity are dimi-
nished after V. S. it is good, but it must be avoided here if con-
comitant signs of great Debility.

It relieves Difficulty of Breathing, the Decubitus Diffi-
cilis, the Decubitus &c we may be certain of its propriety.
Another Mark is the Appearance of the Blood itself.
If it has flowed in a full Stream from a large Orifice &
solid very suddenly & it still is a uniform Coagulum
we may suspect Deposition & Debility & hence a Contra-
indication to V. S.

If under these Circumstances there is a full separation
of Crassamentum & Serum & a Separation of layers, suf-
ficiently tough on the Top, V. S. is established as proper.
Serum not separated is no Mark of debility, nor is a less
separation a Mark of Phlogistic Diathesis - As I
have found by Experience - Indeed I think that small
Crassamentum with Buff, that by its Contractility
draws up to a Purse gives the greatest Mark of Phlo-
gistic Diathesis. When the Crassamentum is diffused &
has a Plain Crust on the Surface wth little Serum sepa-
rated, I look upon it as a Symptom of less phlogistic
Diathesis & the Serum so more or less red, like the
Lotus Carnium, shows Putrefaction.

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Yellow Serum too is the same, the ambiguous in some
Measles as in some Rheumatic Cases of this Country
in which no putrescency could be expected, I have seen yet.
low Serum - This then is a mark perhaps of Phlogis-
tic Diathesis as well as Putrefaction.

The most difficult Cases of Fevers with regard to U. S. w
Juna Fevers has subjected long Debility & Signs of Topical
Determination at the same time.

The Measure of U. S. Practitioners have found difficult to
establish - ^{there} many Mistakes on both Sides.

Many Fevers more fatal for want of U. S. many because it has
been too plentiful - I have given you Rules for determining
1st The Constitution of the Patient, 2^d The Circumstances
he lives in - his being an Inhabitant of a Cold Country & so
might have added according to the Seasons - Thus intense
Winters & Summers in ourthern Parts of America. Prac-
titioners inform me that we do not bear U. S. so well as
Europeans. 3^d Circumstances are Debility previous, Disease &
We are influenced by the Cause whether with or without
Miasmata & Contagion 4th as more recent. 5th according to
Type, as more continuous or intermittent especially
we judge by the Symptoms, tho this to young Practitioners
may be very fallacious. Thus in a milder Fever violent heat
at first - There bear a single Bleeding, but a 2^d may be nec-
essary. But the Symptoms will not do unless former
Circumstances be taken in. lastly The Effects of U. S.
then instituted must guide us. A Difficulty occurs, said,

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in topical Determinations, when great Debility is also present often in these Fevers from Delirium, Suspension of Conscience, Hæmorrhæm, Tubercles, Scirrhus, Tendinitis have Succession of Inflammation of the Brain, with bleeding from proper Vessels. Topical Inflammation always gave general phlogistic Diathesis, Bleeding would be indicated: but we know there may be topical Affection without occasion of Fever & therefore not giving Phlogistic Diathesis. In such a case drawing Blood from a Distant Vein has no Effect. I have seen an Inflammatory Opacity of the Cornea, which could not be cured by the most copious V.S. Topical Inflammation then unless accompanied with Presence of Phlogistic Diathesis are not Indicants of Blood Letting. In Proof of this we know that topical Inflammation may exist under great Debility of System. Thus the Inflammation in the Jail Fevers. A topical Inflammation may be hurtful in the Pail, & may excite the Sensorium, yet may not admit of general Bleeding without great Hurt. Topical Bleeding, if convenient may be employed. - but difficult often to measure this. I have seen Leeches applied to the Temples go to excess in the whole System. In Affections of the Brain, topical Bleeding on any external Part of the Head, it is probable have greater Effect than general Bleeding in Affections of the Sensorium. But this Affection of the Brain may be to a considerable Degree not to be relieved by V.S. without injuring the System. Hence general or topical V.S. This is the most distressful

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Case in Fevers, tho as so we must take the ancients Remedium
therefore employ, if possible, topical Bleeding.

The Quantity of Blood to be drawn is difficultly ascertained.
Physicians & Patients determine from the State of
the Pulse, the Quantity, but this is not accurate. In tying a
ligature we accumulate Blood in the limb. The Resistance
of the Ligature is equal to the Force of the Blood flowing from
a Vein, because it does not flow sensibly from a Vein opened
without a ligature. & therefore during the whole Operation of the
the Blood comes out equally. Accordingly I have found no al-
teration during Bleeding, when Deliquium ensued directly after
taking off the ligature. Indeed we may judge when Deliquium
comes on before the ligature is loosed. This however at one is a
very fallacious Test & tho it

In great Tension of the arterial system, we often have deter-
mined the Propriety of V. Scarification by the Relief perceived
by the Patient, than by an Alteration we could feel in it
tho. Other circumstances may be taken in, tho nothing
very certain. In a vigorous & moderately robust Person,
the Blood is a large Evacuation - after this great Caution.
In very robust Persons & great Phlogistic Diathesis, I will
not exclude this, tho this gives rise to great Debility & very
 tedious Convalescence.

A second Evacuation is Purgatives.

To consider their Effects, we must consider that it cannot be
obtained without Stimulus applied to the Intestines. This
may be of such a Kind as to communicate Stimulus.

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And therefore certain Purgatives may hurt as much by Stimulus as the relief by Evacuation. Purgatives then for taking of Tension are not admissible, except Stimulus much confined to the Elementary Canal. It is a known Observation that the Evacuants by Purging, have not equal Effects with that from V.S. The Reason is evident. The Tension of the Intestines much connected with the whole system, but the Connection of it with the sanguiferous System is not near so great as the Connection of Tension of the different Parts of that System. Thus loss of Blood from a Vein is as good perhaps as loss from Intestines.

All the Reasoning against Excess in V.S. will apply to Evacuation of Purgatives. This may be the Reason why Practitioners have ^{added} Purgatives as Evacuants, in Fevers. Hence Emollient Clysters substituted. But besides the Evacuation by Purging takes off the Determination to the skin, so useful in Fevers. According to a spontaneous Diarrhoea or severe purging has been always reckoned hurtful in Fevers, & hence Effects of purgatives not answerable to what we might expect from Evacuation. Nor have they been much recommended. Sydenham condemns them in Pleurisy & Pneumonies. here we might suppose however they would derive from the Breast as well as V.S. But the Consideration of taking off Determinations to the skin must be taken in. The antiphlogistic Purgatives may be used, but from the Danger of Excess from them deriving from the Surface not much employed.

Yet in some Fevers Purgatives are very good, let us consider when

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in such Cases they do not act differently from demonstrating the general Tension. - They are good in Fevers called bilious, that is, Fevers with considerable Determinations of Fluids to the abdominal Viscera. This I said was peculiar to Fevers of the intermittent kind especially the autumnal, because the Bile seems under a particular Vibration at that season. I suppose with Practitioners that Bile in these gives acid Matter & by stagnating gives Rise to the Absorption of it. & hence Purgatives useful. This Affair of Absorption is not established certainly; but besides, it appears that Fluids determined to the abdominal Viscera do not act always by the Quantity poured into the alimentary Canal, but by being accumulated in those Vessels occasion Spasm. In Proof we find that the Liver &c are much enlarged. The opening the numerous excretories of the alimentary Canal may be the very way to obviate these Effects.

This shows the Application of Purgatives in Intermitents & Remittents. It is also the Foundation of Purgatives in putrid Fevers, where Ferment has often a Tendency to induce Intermit. And hence so much Talk of Crystals of Tartar in putrid & malignant intermittent Fevers, so frequent in warm Climates especially when exposed to marshy Exhalations. These Fevers frequently attended Petechia, but then not always a Mark of Putrefaction. In nervous Fevers from human Effluvia, this is the Case when attended wth Petechia.

Dr. Meibom proposes curing all Petechial Fevers by purging. Many of his Proofs are very ambiguous, thus he used Rhyml Sulphureum often as an Emetic as well as Purgative. he used opuscul Sulphureum lead

(a) This is a quotation from Alexander's
Epays - the sentence is incomplete.

me to observe that Tartar Emetic has been used as purgative. I believe that it has good Effects when it purges; tho many late Practitioners quite overlook its evacuating Effect, it is certainly very considerable. I shall endeavour to show that Purgings as mere evacuations have not been so successful.

A third Head of Remedies remains under the general title of Refrigerants. The particulars are acids & certain Neutrals. That both are sedative many considerations lead to. particularly their experienced Efficacy in Hemorrhages. I can only be owing to sedative Power. Acids besides, quench Thirst & therefore Stimulus. by taking of the Dryness & Blamony. mops of the Mouth. by resisting Putrefaction at least in the Primæ Viæ if not in the Blood. by promoting Urine & profusely Perspiration. they may be good. It is probable that vegetable Acids promote Sweat. That fresh Fruits are the best Evacuants for acid Bile. In all putrid & Inflammatory Fevers, acids are undoubtedly proper. In nervous Fevers their sedative Action is not hurtful. Like that of neutrals it probably occasions a Reaction of the Sensorium that determines to the Surface.

Neutrals - What Power they have as Sedatives is still uncertain. In Cases where Momentum of Blood is so violent as to threaten immediate Eruption, a Dose of Nitre might

This is a refinement that perhaps is scarcely admissible. Their Action in these Cases is perhaps the reaction. They occasion determining to the Surface. This sedative

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All these act partially by restoring more particularly the nervous Power to the extreme Vessels appearing especially in the Determination to the Surface.

The 2^d are such as especially restore the Tone of the arterial System. The Action of the Heart & Arteries I have said was necessary to create the Action of the Sensorium. but often this fails for want of Action of the Heart & Arteries. It is to be restored by cold Bathing Tonics & the Stimulants called Cordials.

A 3^d Head of restoring regular Action of the Sensorium are antispasmodics. We are to consider these in 2^d order mentioning Diluents. This is an Example of the same Remedy answering different Indications. They were a Part of an hygienic Regimen by obviating Acrimony in the Primæ Viæ, in the fluids of the Mass of Blood & diluting too, if you please so favourable to obviating Acrimony, as favouring Secretion & Excretion.

From their favouring Excretion by Urine, Perspiration & Sweat, they belong to this Head, as they carry on Circulation more fully to the extreme Vessels & thereby contribute to restore their Action or at least obviate their constriction. If this can be done, by the Bulk of a non-stimulant Fluid, it may be done wth Safety & Advantage. When then is justly acknowledged the Basis of Diluents, such Stimulant Impregnations may be hurtful.

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It has been alleged that Pure Water is less apt to
 unite with the Fluid than some Diluents of a more
 acid Kind - that Water runs off soon by Excretion,
 & doing so it answers the Purpose of opening Excre-
 tions but is less fitted for taking off Acrimony or
 moving Lentor. Physicians then have found that
 impregnating Water with viscid Matter is usefull,
 & have they employed impregnations of farinace-
 ous Seeds, as less apt to pass off & most apt to in-
 crease Acrimony.

critical facts - As antiseptics & antiphlogistic
 natives I have said they may be used; I have said that
 the Dependence is to be had from their refrige-
 rating Power, as they cannot be thrown in in suf-
 ficient Quantity, and tho they should, yet of little
 efficacy, as the refrigerating Power seems immedi-
 ately to excite a Reaction of the Whole, at least of
 Part of the sanguiferous System.

They seem thus to have much Power in restoring
 Action to the Extreme Vessels & therefore of curing
 Fever, as depending on this. That they operate thus,
 appears from the Heat on the Surface attending their
 Exhibition from the Sweat that often follows & espe-
 cially their operating Effects of Cold Pott in Intermittent Fevers.

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That they act thus appears from the analogous operation of Cold water. We might enter into curious Disquisitions of the extreme Vessels being as it were, the Instruments of Tension, of their Connection with the Sensorium, of this with the Stomach & thereby the Stomach with the extreme Vessels. This would give Validation of our Theory of Fevers; but it is sufficient to know that Neutrals obviate Spasm of extreme Vessels & thereby I suppose Spasms are overcome by restoring action to some part of a sanguiferous system. This is performed probably by neutral salts.

Three Questions occur here.

1st To what limits these may be carried.

2^d Where properly to be applied.

3^d What neutral salts are proper. As to the first we know that they are not always efficacious.

The greatest Advocates for them acknowledge them only efficacious in Tertians & Quotidians.

It is necessary to know what is the Effect. If they do not cure, but contribute to it, why are not the Doses increased & more frequently repeated? I suspect they may thus do Harm. A Hot fit formed to a certain Degree only is necessary to remove a Fever. I have observed that by too violent hot Tit, the Patient was dissolved in sweat & the Fever as far from Solution as if no hot Tit at all.

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I suspect that the constant use of neutral salts would prevent that proper Degree of hot Set which is necessary for solution of the Fever.

The Spanish Physicians according to Cleg horn alledge that from Experience it appears that inhibiting Drinks too soon prolongs Paroxysm. I conjecture here that any Heat whether Cold as refrigerant or hot as immediately releasing the Surface will tend to this.

I imagine I have found the Reason of the Abuse of neutral salts here.

This leads to our 2^d Question of the Propriety of applying when the cold set is come on & 2^d When Hot.

4th Case when a Spasm in the Stomach, it may be properly taken off by neutral salts. This appears in Intermitents in which I prefer their chief Use to the Time of Exacerbation. In the ordinary Exhibition of saline Mixture, it is a Placebo. If we would have Effects larger Doses must be employed.

Choice of Neutrals? A Question undetermined.

Few Practitioners have Diligence or Capacity for enquiring into these important Points. Sal Ammoniac & digestive salt have been reckoned most effectual to take off Vomiting in Fevers we have employed saline draughts. What Difference in one or the other & which

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appropriated to Intermitents, continued not known.
The Sp. Mindereri as exhibited in general is furor lous.
have seen it used in prodigious Quantities without
Effect. I only observe here that this is not ascertained
Sudorifics. These at present on an uncertain footing.
They were formerly considered as the best Remedies &
Sydenham properly observed their Uses. But it is
not certain that Sydenham this follows did not go
too far, taking Sudorifics for every means now or less
stimulant, w^h may promote Sweat & Fevers in so termi-
nate in Sweat. Neglecting that the Advocates for
sweating are now deprived of the support of morbid
Matter to be thus expelled. I think that upon this gene-
ral Fact of Termination in Sweat, we might take
Arguments for Arts promoting it. Many specious
Reasons might be deduced.

Since Sydenham few Advocates for sweating. Dr Morgan
in his mechanical Practice has however alleged
that most Fevers may be thus cured, but not con-
clusive. for 1st in Intermitents many Sweats
without final Solution. 2^d final Solution in Fevers
are not in proportion to the Sweat. Critical Sweats
often moderate often Intermitents are aggravated
by profuse Sweats & their Length continued. Intermitts

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so are often attended wth Sweats, that protractly Disorders.
 Sweats urged are apt to render Intermitments continued
 much more pernicious. This has been said of Dr Morgan.
 But on the other Hand we have his Testimony of curing
 all Fevers by sweating, & must certainly go
 some Length notwithstanding his Prejudices. I have
 known other Physicians that followed this practice
 successful. In the Age of Aesculapian had we time
 to consider them many Facts occur & some fevers ab-
 solutely require Sweat. The Point then is not deter-
 mined. I think that if a Fever can be perceived app-
 roaching before Formation of the m^{or} sweating may pre-
 vent this & by revolving Determination to extreme
 Effluvia may abort the Fever. We have Proofs of this
 in the curing Intermitments by supporting Sweat
 till the Time of Accession. By such Means does
 Dr Morgan say he cured the most obstinate Quartans.
 Instances in Practice of Continueds cured by the same
 Means. It may be said here that the Fever would not
 have come on, but from the Circumstances indicating
 it & the probability of the Practice we may suppose
 it effectual.
 Again Sweating may be admissible in a second
 Season. This appears from Experiments.

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Sweating will be found useful when from the Nature of Epidemics we know it to depend on a remarkably sedative Power. In Proof of this the unusual Practice in the Plague has been sweating.

Many Desputes - but we neglect the Objections that arise from Malad. Ministration of Sweating, we shall

find the most happy Cure of the Plague to have been by Sweating. Deemerbroock was most free in this Prac.

See of late Coki - & others late Practitioners

have waited more for Nature, but seized the first Oppor.

tunity of promoting this Tendency. Other Proofs of

sweating in the sweating Sickness. Many Testimo.

nes of the Effectfulness as well as the Inefficacy of

sweating - To determine here we must observe

that in cases when sweating is most useful if

this is pushed by force, that is by Inflammation

stimulus, Load of Bad Cloaths, or if with the sweating,

Relaxum, Difficulty of Breathing, or the Sweat partial,

such at least practice, if not aggravate the Disease.

Continuance of the Hot fit depends on Phlogistic

Diathesis, what we lengthens this has a Tendency to

produce this Diathesis, & therefore give more Danger.

Violence of the hot fit besides may occasion

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Topical Determinations of the greatest Danger in Fevers. The Urging of Sweats then requires great Caution. - My Rules here are that

1st When Phlogistic Diathesis or the Spasm necessary to this, urging Sweats is very hurtful. On the contrary when Spasm not formed

The Question of the applying of Sweats particularly relates to the yellow Fever of the west Indies. This appears to be even not fortunate only when in its Beginning has been forced. I am almost persuaded that the same thing is to be done as in the Plague. we must not urge it too early, but moderate the Tendency when it appears. Many facts show the Danger of urging Sweats too far.

When Symptoms of the Hot fit are strong, we have a Tendency to sweating is not to be encouraged, as we may suppose the Hot fit that the Sweat will be pernicious, & more moderate would have been salutary. Topical Determinations are too to be apprehended from urging Sweats. I would here give 2 dogmatic Rules. Where Diathesis Phlogistic evidently prevails is the Spasm depending on this, or indeed being obstinate from any cause, sweating perhaps is not to be pushed. M. CHEROZ speaking of the

Cases for or against Sweating, says see the Author's writings -

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I would then forbid sweating under any very violent Spasm.
Before Spasm is formed & especially when recent & 3^d when
Miasmatic Contagion is sedative than the milder sweat is
allowable. In 4th Perhaps the Disorder may be prevented by
sweating. In 2^d Before Spasm much formed it is more safe.
but in 3^d when we know that the sedative Power will multiply
by Fermentatⁿ or induce Debility by Repetition of Ph.
or vomits we would wish to employ sweating. The
sweating in these cases must be excited by the least Stimu-
lant, as Liquid Applications, bulky warm fluids that act
chiefly by bulk. It is as necessary that sweat be not
very profuse, but moderately carried on. Ehret & others
were where to inculcate that a more full Respiration
is best, & that the Relief is not as Degree of the sweat.
We may from our Dissections find too why sweating is best
after Blood-letting. Hence Sydenham promising V.S.
to sweating in the Plague was well founded.
It has been observed that a previous Bleeding not only
reduces sweat safer but also purging.

In the late Plague of Mawell it was a universal Prac-
tice - Similius ventured on V.S. but commonly gave a
Vomit to clean the Prime Visc. If this did not purge, they
opened the Belly. & then in the least Effort of Nature promoted
sweat, on which the cure was rooted. The previous Purging they
found useful & this we may understand from the Consideration

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of the Vessels of the alimentary Canal, being taken
off & thereby the dangerous Accumulations in internal
Parts obviated - As to the Degree of Sweating not es-
tablished. - Different Opinions. Guernier thought
that he might for the sake of the Patient allow Sweats
to subside & renew them again. But Sydenham says,
that those Sweats are very Dangerous. The subsiding was
attended wth appearance of Spasm & the Renewal attended wth
Aggravation of Symptoms. Sweats then, that the Patient
may support them a sufficient Time, should be moderate,
violent ones for a short Time have been often pernicious.
In Fevers there is an Exacerbation in 24 Hours. Somague
that Sweats ought always to be continued till we are
sure the next succeeding Accession is passed over & hence
must be intended beyond 24 Hours. The good Effects of
Sweating depends on its being equally determined to all Parts
wth down to the Extremities of the Toes. Dr Chalmers of Carolina
runs more to Sweating but takes especial Care to determine
it to Feet - If we wish not to apply general Stimulant suf-
ficient for this, yet by particular Stimulants to Extremities
the End may be obtained without the Inconvenience. Hence
he puts Hot Bricks to feet. This Author has presented us
with a Difficulty. He insists that Sweating is useful in
Inflammatory Diseases as Pneumony. If he is right
our Reasoning is doubtful if not false.
The only Acc^t by w^{ch} I can obviate it, is that as there

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 to hear
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 and
 hope
 you
 are
 all
 the
 same
 I am
 your
 friend
 and
 servant
 John
 Adams

Pneumonias may take an Intermittent Type, I would suppose them not Diopathic. Pneumonias but only accidental Determinations in pure Fevers. This however wants further Confirmation.

I might enter on the Remedies employed for sweating, but it's necessary as I have said no stimulant Prepare. Opium has been pretty universally the Sudorific. The active Part of Mithridate & Theriac perhaps is Opium. In the Plague of Marseilles simple Opium & Laudanum answered equally well. As many Objections have been against sweating by Narcotics as by Stimulants, however we explain it, Opium is reckoned hurtful in Phlogistic Diathesis.

But as Opium sweats by taking off Constriction of the Extreme Vessels, this more than compensates for Stimulus therefore may not such Sweats be useful in Spasm? My Practice does not determine this. Sweats may be rendered safer, if produced by such Remedies as operate more by taking off Relaxation of extreme Vessels than by stimulating Heart & Arteries. Such are Neutrals & Emetics.

Neutrals are not yet determin'd, never have been employ'd on the Plague: but Practice now shows that they are Sudorifics of the least Stimulus & best fitted for avoiding the Dangers of exciting Sweat in great Hemipilaxis as mentioned by Chinus. Let us then consider whether the Objections against sweating that have arisen from

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using Stimulants, may not be remedied by using neutral salts.

Emetics. The present favourite sudorific in Practice. De Haen is the only famous Practitioner who opposes their Use. We must consider them as producing

1st Complete Vomiting

2^d Inducing Nausea without Vomiting.

Vomiting generally useful by cleansing the Stomach, so frequently the Seat of Irritation in Fevers.

Useful as the Operation conveys bilious pancreatic Ducts & excretories of the alimentary Canal, particularly useful then for evacuating the Accumulations mentioned.

3^d More Considerable Action is the Determination to the Surface w^{ch} they certainly do as well as from acting on Extreme Vessels as by the Exercise. That operate on these Vessels appears from Natures bringing on hot fit by vomiting. & also by their so frequently curing Intermitents. The Case in w^{ch} most hurtful when Inflammation on the Stomach or other topical Determinations in great Degree. Often not effectual from their Effect not being sufficiently durable. If the Action on the Stomach is necessary in curing Fevers to be supported some Time, vomiting is improper.

The Exacting too of Vomiting will occasion a proportion Depression. As appears from the Weakness felt afterwards, & especially from Practitioners observing that if whole Operation of vomiting is over before Accession of intermitting

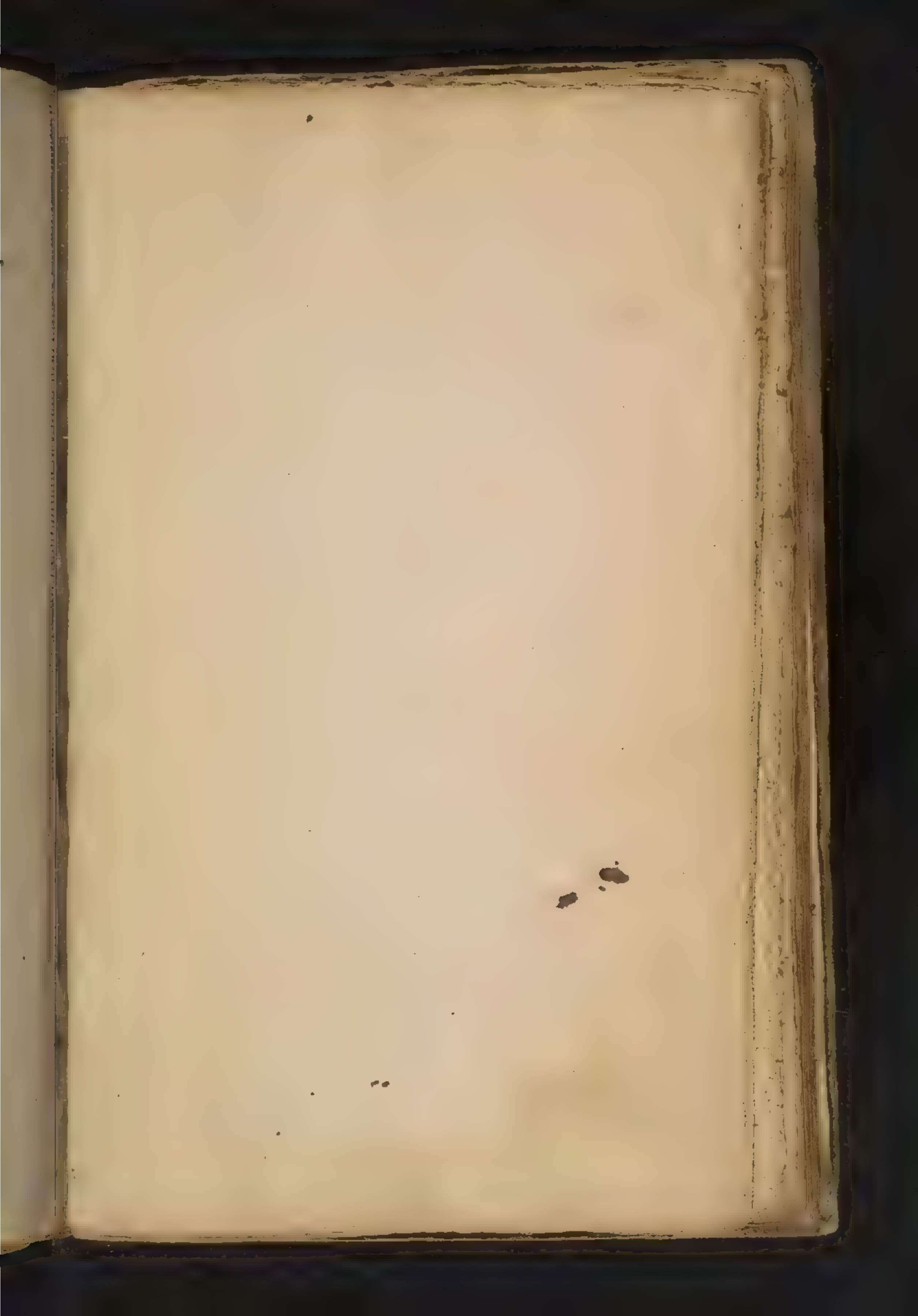
Paroxysm
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Paroxysm, this becomes more violent. - This I can only explain from their inducing Debility.

Besides Evacuators & general Agitation, Emetics act on extreme Vessels by Action on the Stomach. The Proof is that when only giving Nausea they often give sweat, or without this relieves the Fever. - These to be explained I think from their restoring Action to extreme Vessels. The Action of Stomach not only produces Action in extreme Vessels of the Surface but also in extreme Vessels every where, & therefore a nauseating Dose of Emetic may operate Obstruction of the Viscera without being applied to Intestines. but when for this Purpose we generally give such Doses that they reach the Intestines. As to the Particular Administration we must first consider the Time of the Fever when most proper to be given. It has been found in that a nauseating Dose even before the Fit has with Sweating at least rendered the Fit less considerable & often cured. It has been found that the Approach of a continued Fever has prevented the Disorder. Dr Lynn has given many Facts in Proof of it. He supposes it owing to the miasm & contagion being particularly lodged in the Stomach & thereby thrown out. But without raising Doubts about this Seat of Poison or the Reasoning that would follow I say that Emetics are effectual when no Vomiting has occurred or other Means of Expulsion & then we

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rather refer its Action to the obviating of the Spasm -
 Emetics given in cold Fit gives an End to it & brings on hot
 Fit & by repeating this, we may often cure the Fever.
 The Vomiting of the cold Fit I have said appears a means
 of Nature for bringing on the Hot. Its coming on late
 may depend on a Spasm being necessary for some
 time before it affects the Stomach.



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What kind of Emmetic Medicines sh^d.
 we employ? In ^e the beginning of
 Fevers vomiting is to be promoted
 especially if no Inflammⁿ. Diarrhoea at
 tends. After Fevers have continued
 for some time they are less safe upon
 the Antiⁿ of Inflammⁿ. Congestions happeⁿ.
 ning sometimes in ^e the progress of Fevers.
 The nauseating Medicines only are
 to be used in these Cases. I am happy
 in finding several Authorities of Credit
 agree ^{to} me in this Practice. Vomiⁿ.
 ting therefore sh^d. be continued only
 to ^e the beginning of Fevers.

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Specuana is ^e medicine usually
 employs to excite vomiting. But
 the stimulus of this is often too weak
 to promote a sweat. the I Mettic
 is preferable to it. the use of this
 medicine was first suggested
 by the introduction of James's
 Powder. the I Mettic is a more
 manageable medicine than James's
 Powder or any of the other prepara-
 tions of Antimony. It has been given
 differently by different Practitioners
 & is ^e Reason why it is sometimes
 given th wout success. we sh^d always

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give it just before the exacerbations
of Fevers in such doses as to ex-
cite a nausea without a vomiting.
if it sh^d. bring on a puking I always
suppress it by giving no warm water.
- the Effects of this Remedy are in
some measure abviated by promoting
a vomiting. the more severe y^e
nausea the more successful y^e
medicine Operates. When y^e Fractie
papis into y^e Gutts it always produ-
ces some evacuation that proves of
use more especially sweating. By
this management I have often
procured a Termination of Fevers

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at Once but its most general
 effects are to bring on sleep - lower
 the Pulse - & thus induce consid-
 erable Remissions in the Fever. By
 repeating the medicine the Distemper
 is likewise rendered shorter. The
 Linctus may be given in all stages of
 Fever before Mortal symptoms
 come on, but it does service chief-
 ly in the Beginning of Fevers & if
 it does no good on the first two or three
 days of Fevers we may lay it a-
 side. Nauseating Medicines are
 less serviceable in the Pylmorica

than in those Fevers where there is
no Inflammatory Diathesis. However I
have found it useful in Inflamm.
Disorders. I would recommend
a Trial of them to you in such Cases.

We come now to treat of external
Medicines th are used to promote
the excited state of the perspiration
— these are Blisters & ^{warm} ~~cold~~ ^{Scalping} ~~Water~~

Blisters. — most of Practitioners

disagree about these Remedies.

I shall not discuss the various Opinions entertained concerning them.

They stimulate & excite a

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considerable Inflammation, but this
is topical & does not extend to the
whole System & therefore frequently
produces no quickness of Pulse unless
in Persons of very delicate Habits
or those who are subject to a phlog-
istic Diathesis. But ^{even} in these Cases ^{the}
advantages obtained by the Evacuation
amply compensates for any Stimu-
lating powers they exert. We cannot
hesitate for the success of Bleisters in ^{these}
from their Stimulus. They operate
chiefly on the vessels on the surface of
the Body. The Skin is a continued

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membrane & any stimulus to one part is easily communicated to the whole. The Effects likewise procured by Blisters tend greatly to cure Fevers. - In the Beginning of Fevers we sh^d. be cautious in using Blisters, Altho' I think we are apt to run to an extreme in this Rule. in all Fevers where the Sedative powers prevail, Blisters are more useful than in those where the stimulatory prevail.

Dr. Hayham forbids them in Inflamm^x.

& putrid Fevers. But I think they

may always ^{be} used ^{the} with Advantage in

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all Inflam^y Diseases where they
can be applied near to the seat of
Inflammation. Dr. Haen supposes
the stimulus of blisters to be very gene-
ral, altho he acknowledges at the same
time that they diminish the heat
of the Body, & approves of their
being applied in topical Inflam-
mations. Dr. Pingle has confirmed
the usefulness of this Practice in his
Diseases of the Army. Dr. Lind recom-
mends blisters almost universally
& he is an author of great credit
& veracity. He used them wth the

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For

utmost success in all Fevers from
 Contagion. See the remarkable Cu:
 of their success in his Treatise on
 Fevers & ~~Contagion~~ Infection. Some suppose
 Cantharides dissolve the blood & are
 therefore hurtful in putrid Disor:
 ders, but this I deny, for y^e Quantity
 of Cantharides taken into y^e blood
 cannot be equal to y^e Effects
 produced upon it. Besides y^e Experience
 of Lind - Sturmelle & Riverius all
 confirm their Usefulness. great Care
 sh^d. be taken to avoid Stranguries in
 Fevers, & this is to be done by not

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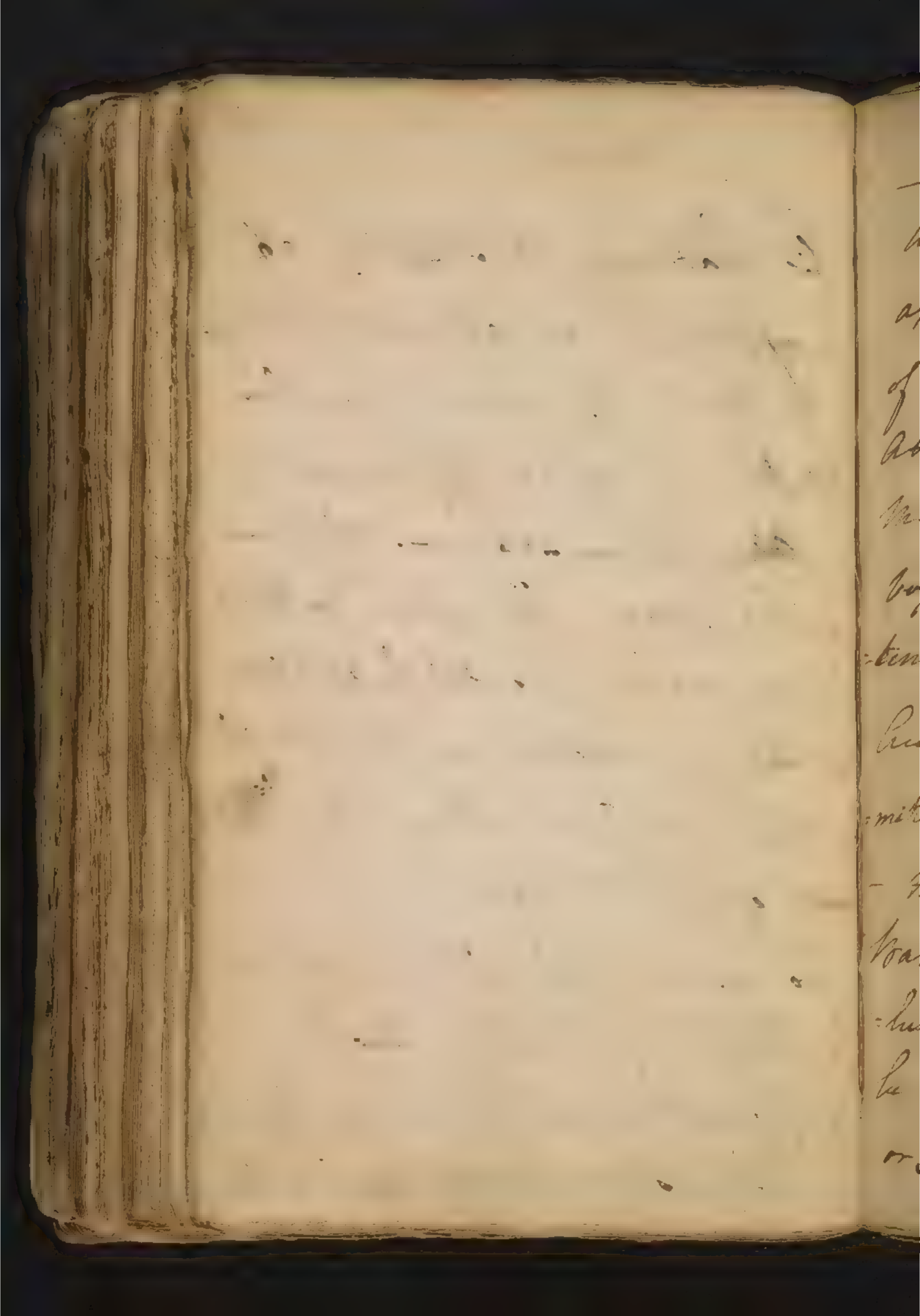
suffering the Volistors to lie on too long. we sh^d. likewise be careful to avoid giving the Patient any pain in dressing the Volistors.

The best place of applying Blisters is to the Head & Back, from Inflammation being so frequently seated more or less in those places. They are not so useful when applied to ^{the} lower Extremities Altho' the vessels appear to want to be excited there. instead of applying them to the Ankle I think it would be best always to apply them to the Thighs. —

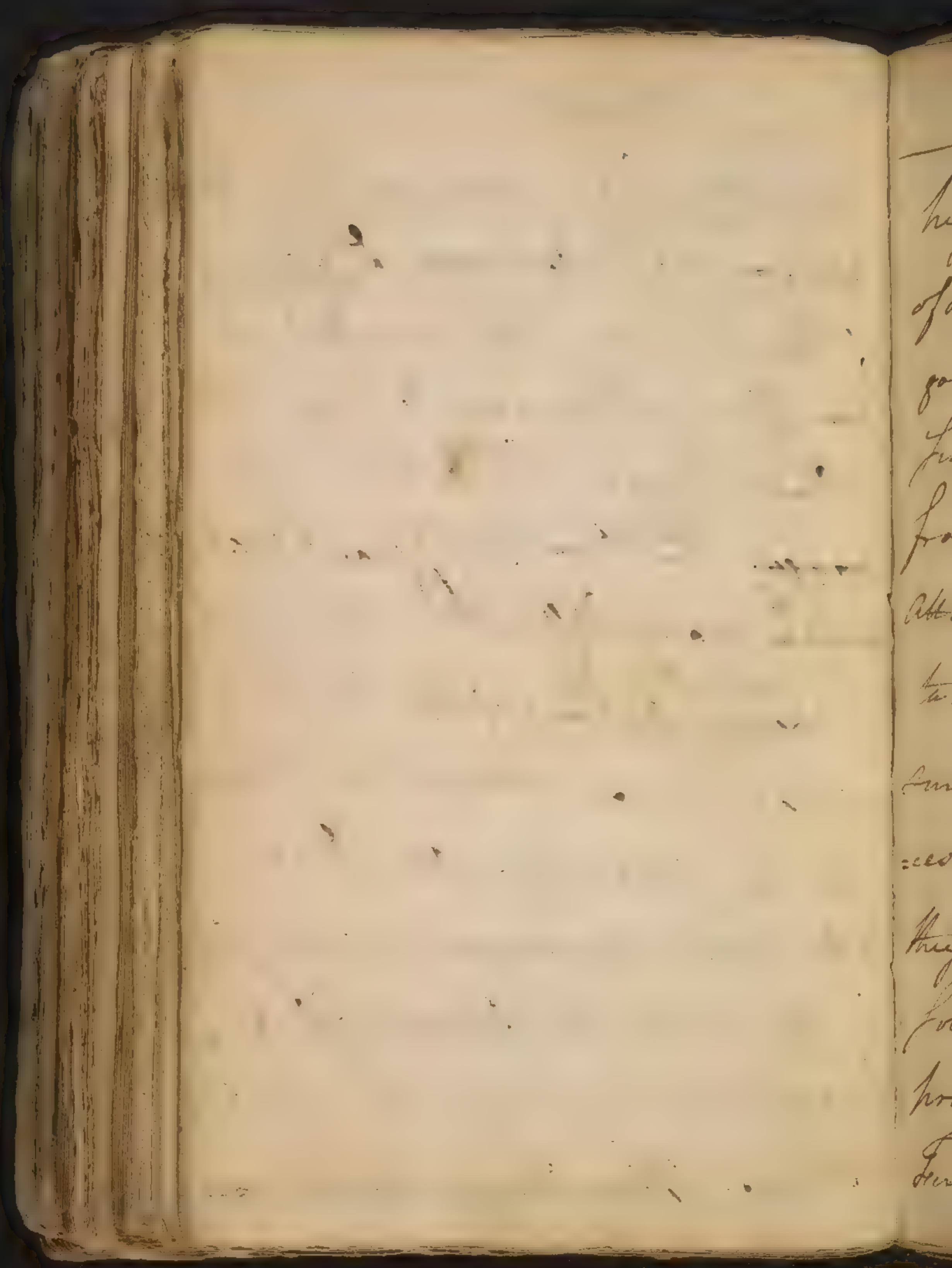
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This leads me to speak of
Synapisms ⁱⁿ w: are applied always
 to the Feet. they may be used where
 Soliters are forbid by Phlegmories
 or Other circumstances. When we
 want a sudden stimulus nothing
 but Mustard = ^{is} sh^d? be applied,
 but this must not be continued above
 an hour or two or it will excite the
 most exquisite pain.

To restore the Determination to
 the Surface of the body Another Rem-
 -edy of great Use in warm: Bathing
 - This was used greatly among the



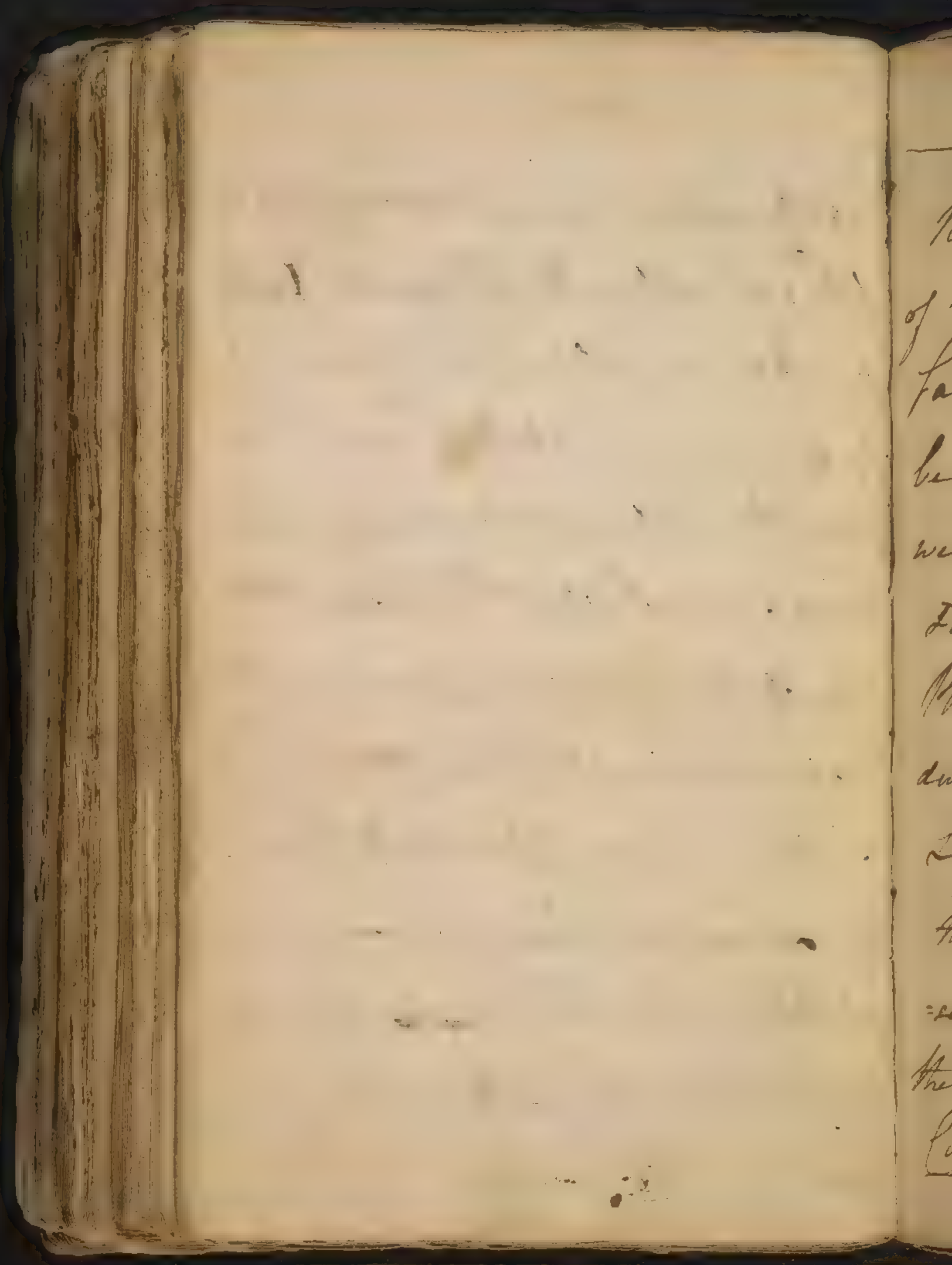
Ancients, but in Modern times it
appears to be laid aside. Dr. Gilchrist
of this Country has recalled the
Attention of Physicians to it. See the
Medical Mag. & his Treatise on Sea
Voyages. The Practice Grant is at-
tended wth many Difficulties, upon this
P^{ar}: Lomentations of the lower Extre-
mities have been substituted in its Room.
- This has Advantages Above a warm
Bath. It excites a more universal Stimu-
lus. It disturbs the Patient less, & may
be continued much longer even two
or 3 hours. These Lomentations are



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highly useful in ^{the} advanced state
of fevers when the Phlogistic Diathesis
goes on, or when the return of
pusorium is resisted. ^{as} we know
from the Delirium & stupor which
attends. the heat of these fomentations
takes off the Atonia & Spasm in the
small Arteries & thus often produ-
ces Sleep & Remissions of the Fever.

They sometimes bring on an entire
Resolution of the Fever. ~~when~~ when they
procure sleep they seldom fail of curing
Fever in a little time.



But in order to excite the vigour
of the System the Action of the
Sanguiferous System must like
be excited when it is too low or too
weak. The Heat of the hot Febrile we
said depends upon the Presence of the
Phlogistic Diathesis; a want of a
due Degree of hot Febrile is attended w. a
Loss of Force in the Arterial System.
This occurs chiefly in putrid Disor-
ders. The Medicines proper to excite
the Action of the Arteries are
Cold & tonic Remedies.

[Faint, illegible handwriting on lined paper]

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Cold tends to excite the vessels. we see it bring on Inflammations. nay we know it to be the chief Cause of the Phlogistic Diathesis. It is therefore highly useful in Nervous and putrid Diseases. we apply it in two ways 1st by cold Drinks. or 2^d by cold Air or cold water applied to $\frac{2}{3}$ Body.

Nature leads to cold Drinks by Instinct in all Fevers. warm Drinks ~~are~~ were introduced only by Reflection and Art. But these ~~two~~ are divided into different Opinions concerning the use of cold

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Drinks. I shall not enter into their Disputes, but briefly point out ^{the} Cases in w: they are hurtful & useful.

1st Cold Drinks are hurtful in all Cases of Inflamm: & Fevers, or such Fevers as occur in cold seasons or in Children.

2nd Cold Drinks should be employed with Caution in the Beginning of all Fevers.

3rd They are highly useful in all Nervous & putrid Fevers especially in their advanced state.

4th In all autumnal Fevers or the

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Fewers of warm passions & warm C:
-mates they are useful.

3.rd The Ancients used them about the
time of the Exacerbation of Fevers. see
Somner upon this Practice. The Italians
have greedily imitated the Practice
of the Ancients in this Respect & even
use Ice to cool their water.

cold Applications to the body ~~is~~ is
likewise an ancient Practice, but
has been laid aside among the Moderns.
Sir John Puzos has many Instances in
his History of cold bathing of the

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happy Effects, followed the accidental or voluntary plunging the body in cold water. But it is hard to reduce this Remedy to any Rules of Art. Several German & French Authors speak highly of the Advantages of Immersing in cold water in Fevers, but I cannot pretend to speak confidently of it. I think however it may be ranked among the Remedies that are to be used to excite the Action of the extreme vessels, and to promote the tonic power of the whole System. It has been found

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chiefly useful in the Putridal Fever.

We come now to speak of $\frac{2}{7}$ tonic
Medicines. These are very numerous
such as Astringents-fossil substances
vegetable matters more especially the Peru-
vian Bark. I shall confine myself only
to the Bark ^{which} is ^{the} most efficacious
of any vegetable or fossil astringent
we are acquainted with. Some suppose
that it Operates Specifically, but I shall
endeavour to explain its Operation in
another way. Fever we know comes on
^{the} w: manifest signs of Debility & Atonia.
now the Bark acts by Obviating this

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Atonia. Other Astringent Substances
 produce the same Effects. if it is given
 while the Force of the System is proter:
 naturally increased or during the fever
 it does mischief. It is hurtful likewise
 in all Inflamm: Fevers, ~~but~~ most
 service in those Fevers in w^{ch} the sedative
 powers prevail such as y^e putrid
 petechial & fatal Fevers. See numerous
 Examples of this in Dr. Baen works.
 It may used therefore in the advanced state
 of almost all continual Fevers.

The Bark has been found highly useful

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Febriles

in Gangrenes. Putrefactions in^d
 Animal Body can never take place
 but in Cases of an Atonia of the
 Nerves. now the Bark by obviating
 this Atonia removes the Gangrene
 or beginning Putrefaction. the Effu-
 sions w^h terminate in Pus are always
 attended wth more or less of an Atonia of
 the Vessels. By giving Bark we check y^e
 Effusions of red Globules & Obtain an
 Effusion only of that part of y^e Blood
 from w^h Pus is formed. The Bark there-
 fore may be exhibited in all those

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Fever when a Septic Laxity takes place wthout any regard to Remissions in them. The bark proves Antiseptic

when applied directly to the body, but

I can not suppose it is absorbed into y^e.

Fluids. Its action is confined only

to the Solids. It often cures Interm^s.

Fever when given half an hour be-

fore a Seizure comes On even ~~to~~ in so

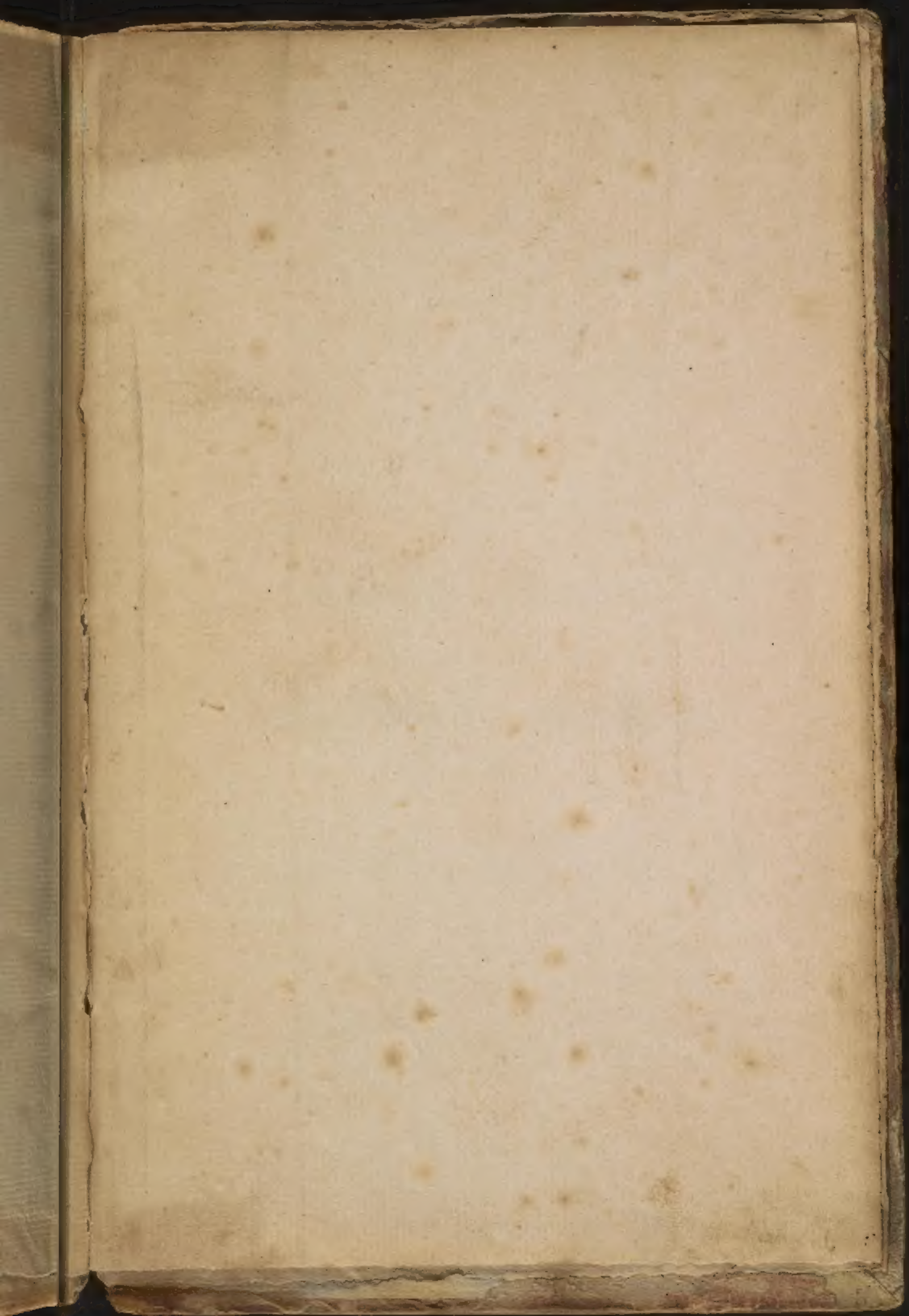
small a Quantity as ℥ss. I conclude

then that the Bark's Action is confined

only to the stomach whose Connection

wth every part of the nervous system

you are all acquainted with.



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